

FISCAL YEAR 2015

TRULY AGREED AND FINALLY PASSED

(AFTER VETO)

DEPARTMENT OF SOCIAL SERVICES

DIVISION OF MO HEALTHNET

HOUSE BILL 2011

VETOES: Section 11.422 (Integrated Healthcare Fraud, Waste & Abuse System); Section 11.440 (Clinical Medication Therapy Services); Section 11.460 (Continuation of a Physicians' Rate Increase); Section 11.465 (Rural Health Clinic Dental Pilot Project); Section 11.475 (Nursing Facility Rate Increase & Home Health Provider Rate Increase); Section 11.490 (Long-Term Care Provider Rate Increase, Helicopter Emergency Medical Services & CHAPs); Section 11.492 (Complex Rehabilitation Technology Items); Section 11.510 (In-Home Telemonitoring Program, Pager Pilot Project & Diabetic Telemonitoring Program); Section 11.527 (Pilot Project for Foster Care – St. Louis); Section 11.528 (Asthma Related Services); Section 11.529 (Regional Care Coordination Model)

97th General Assembly
Second Regular Session
Prepared by Senate Appropriations Committee Staff

DEPARTMENT OF SOCIAL SERVICES

Section 11.400 MO HealthNet Division – Administration

Book 5, page 109

The MO HealthNet staff oversees the operation of the Mo HealthNet program. The division is organized into five sections: Administration, Program Management, Finance, Information Services, and Quality Services.

Legal Base: RSMo 208.201; Federal – Social Security Act Section Number: 1902(a) (4) and 42 CFR Part 432
Funding Sources: General Revenue, Federal, Pharmacy Rebates (REBATE), Pharmacy Reimbursement Allowance, MO Rx Plan, Health Initiatives (HIF); Nursing Facility Quality of Care (NFQC); and Third-Party Liability Collections (TPL)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

Core Reduction: (\$4,000) (GR \$2,000 EE & FED \$2,000 EE) core reduction for costs associated with the MO HealthNet Oversight Committee
(\$12,468) GR EE core reduction – 2% Professional Services reduction

CONFERENCE:

Same as Senate – no additional changes

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400														
MO HEALTHNET ADMIN - 90512C														
CORE														
PERSONAL SERVICES	8,761,779	206.14	9,840,996	234.11	9,840,996	234.11	9,840,996	234.11	9,840,996	234.11	9,840,996	234.11	9,840,996	234.11
GENERAL REVENUE	2,639,054	61.91	2,742,689	64.53	2,742,689	64.53	2,742,689	64.53	2,742,689	64.53	2,742,689	64.53	2,742,689	64.53
FEDERAL FUNDS	4,916,297	115.33	5,331,318	124.97	5,331,318	124.97	5,331,318	124.97	5,331,318	124.97	5,331,318	124.97	5,331,318	124.97
OTHER FUNDS	1,206,428	28.90	1,766,989	44.61	1,766,989	44.61	1,766,989	44.61	1,766,989	44.61	1,766,989	44.61	1,766,989	44.61
EXPENSE & EQUIPMENT	4,048,545	0.00	4,784,154	0.00	4,784,154	0.00	4,784,154	0.00	4,784,154	0.00	4,767,686	0.00	4,767,686	0.00
GENERAL REVENUE	767,616	0.00	785,868	0.00	785,868	0.00	785,868	0.00	785,868	0.00	771,400	0.00	771,400	0.00
FEDERAL FUNDS	2,814,524	0.00	3,391,496	0.00	3,391,496	0.00	3,391,496	0.00	3,391,496	0.00	3,389,496	0.00	3,389,496	0.00
OTHER FUNDS	466,405	0.00	606,790	0.00	606,790	0.00	606,790	0.00	606,790	0.00	606,790	0.00	606,790	0.00
PROGRAM-SPECIFIC	0	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00
FEDERAL FUNDS	0	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00
TOTAL	\$12,810,324	206.14	\$14,626,180	234.11	\$14,626,180	234.11	\$14,626,180	234.11	\$14,626,180	234.11	\$14,609,712	234.11	\$14,609,712	234.11

Pay Plan FY14-Cost to Continue - 0000014

PERSONAL SERVICES	0	0.00	0	0.00	58,602	0.00	58,602	0.00	58,602	0.00	58,602	0.00	58,602	0.00
GENERAL REVENUE	0	0.00	0	0.00	16,144	0.00	16,144	0.00	16,144	0.00	16,144	0.00	16,144	0.00
FEDERAL FUNDS	0	0.00	0	0.00	31,252	0.00	31,252	0.00	31,252	0.00	31,252	0.00	31,252	0.00
OTHER FUNDS	0	0.00	0	0.00	11,206	0.00	11,206	0.00	11,206	0.00	11,206	0.00	11,206	0.00
TOTAL	\$0	0.00	\$0	0.00	\$58,602	0.00	\$58,602	0.00	\$58,602	0.00	\$58,602	0.00	\$58,602	0.00

Cost to continue the FY 2014 pay plan.

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400														
MO HEALTHNET ADMIN - 90512C														
Pay Plan FY15-COLA - 0000015														
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	136,268	0.00	45,426	0.00	45,426	0.00	45,426	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	37,981	0.00	12,661	0.00	12,661	0.00	12,661	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	73,817	0.00	24,605	0.00	24,605	0.00	24,605	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	24,470	0.00	8,160	0.00	8,160	0.00	8,160	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$136,268	0.00	\$45,426	0.00	\$45,426	0.00	\$45,426	0.00

General structure adjustment for all state employees. The Governor recommends 3% for the second half of Fiscal Year 2015 (starts January 1, 2015). The House recommends 1% beginning January 1, 2015.

PAB Recommended Position Incrs - 0000016														
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	10,998	0.00	2,753	0.00	2,753	0.00	2,753	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	3,374	0.00	844	0.00	844	0.00	844	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	6,228	0.00	1,557	0.00	1,557	0.00	1,557	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	1,396	0.00	352	0.00	352	0.00	352	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$10,998	0.00	\$2,753	0.00	\$2,753	0.00	\$2,753	0.00

Page 41. GOVERNOR REC: This item funds class-specific salary adjustments recommended by the PAB to improve recruitment and retention effective July 1, 2014. Youth Specialist I - Repositioning from range 15 to 16 and a two-step within-grade increase. Youth Specialist II, Youth Group Leader, Children's Service Worker I and II, Children's Service Worker Supervisor - two-step within-grade increase. RN, RN Senior, RN Clinical Operations, and RN Supervisor - 6% salary adjustment. RN Manager Bands I, II and III - 5% salary adjustment. This also includes PAB recommended security differentials for RN positions at Fulton State Hospital and SORTS in the maximum and intermediate security unit (RN staff in direct care at the maximum security units at Biggs and SORTS Fulton - 10%; RN staff in direct care at the intermediate security units at Fulton and Farmington - 5%). HOUSE COMM SUB REC: Same as Gov Rec with the following exceptions: Two-step within-grade increases are recommended as one-step increases, only recommend one-half of the percentage increases, and all salary adjustments effective January 1, 2015. SENTATE REC: Same as the House Rec except: RN Staff in direct care at the Fulton State Hospital maximum security unit at Biggs-5%; RN staff in direct care at the intermediate security units at Fulton and Southeast MO MHC-3.3%.

Medicaid expansion - 1886019														
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	1,564,000	26.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	782,000	13.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	782,000	13.00	0	0.00	0	0.00	0	0.00
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	321,000	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	160,500	0.00	0	0.00	0	0.00	0	0.00

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400														
MO HEALTHNET ADMIN - 90512C														
Medicaid expansion - 1886019														
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	321,000	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	160,500	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,885,000	26.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														

TOTAL - MO HEALTHNET ADMIN	\$12,810,324	206.14	\$14,626,180	234.11	\$14,684,782	234.11	\$16,717,048	260.11	\$14,732,961	234.11	\$14,716,493	234.11	\$14,716,493	234.11
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DEPARTMENT OF SOCIAL SERVICES

Section 11.405 **MO HealthNet Division – Pharmacy Program (Clinical Services) Management**

Book 5, page 123

This section provides funding for the contractor costs that support the Pharmacy and Clinical Services programs. Funding is used for cost containment initiatives and clinical policy decision-making to enhance efforts to provide appropriate and quality medical care to participants. The Division of Medical Services seeks to aid recipients and providers in their efforts to access the Medicaid program by utilizing contractor resources effectively.

Legal Base: RSMo 208.152 and 208.201; Federal – Social Security Act Section Number: 1903(a) and 42 CFR Part 433.15
Funding Sources: General Revenue, Federal, MO Rx Plan, and Third Party Liability (TPL) fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No changes

GOVERNOR:
No changes

HOUSE:
No changes

SENATE:
Core Reduction: (\$7,072) GR EE core reduction – 2% Professional Services reduction

CONFERENCE:
Core Restoration: \$7,072 GR EE core restoration

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.405														
CLINICAL SRVC MGMT - 90516C														
CORE														
EXPENSE & EQUIPMENT	12,655,561	0.00	17,775,692	0.00	17,775,692	0.00	17,775,692	0.00	17,775,692	0.00	17,768,620	0.00	17,775,692	0.00
GENERAL REVENUE	469,397	0.00	476,154	0.00	476,154	0.00	476,154	0.00	476,154	0.00	469,082	0.00	476,154	0.00
FEDERAL FUNDS	11,126,813	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00
OTHER FUNDS	1,059,351	0.00	5,085,506	0.00	5,085,506	0.00	5,085,506	0.00	5,085,506	0.00	5,085,506	0.00	5,085,506	0.00
PROGRAM-SPECIFIC	48,345	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	48,345	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$12,703,906	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,768,620	0.00	\$17,775,692	0.00
TOTAL - CLINICAL SRVC MGMT	\$12,703,906	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,768,620	0.00	\$17,775,692	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.410 MO HealthNet Division – Women and Minority Health Care Outreach

Book 5, page 130

This section provides client outreach and education about the MO HealthNet program and reduces disparities in healthcare access for women and minority populations.

Legal Base: RSMo 208.152 and 208.201; Federal – Social Security Act Section Number: 1903(a) and 42 CFR Part 433.15
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

Core Reduction: (\$10,923) GR EE core reduction – 2% Professional Services reduction

CONFERENCE:

Core Restoration: \$10,923 GR EE core restoration

Committee Markup Annual

Committee Markup Annual			FY 2015 - HB 2011 SOCIAL SERVICES										Regular House Bills	
	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.410														
WOMEN & MINORITY OUTREACH - 90513C														
CORE														
EXPENSE & EQUIPMENT	1,063,072	0.00	1,114,750	0.00	1,114,750	0.00	1,114,750	0.00	1,114,750	0.00	1,103,827	0.00	1,114,750	0.00
GENERAL REVENUE	529,741	0.00	546,125	0.00	546,125	0.00	546,125	0.00	546,125	0.00	535,202	0.00	546,125	0.00
FEDERAL FUNDS	533,331	0.00	568,625	0.00	568,625	0.00	568,625	0.00	568,625	0.00	568,625	0.00	568,625	0.00
TOTAL	\$1,063,072	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,103,827	0.00	\$1,114,750	0.00
TOTAL - WOMEN & MINORITY OUTREACH	\$1,063,072	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,103,827	0.00	\$1,114,750	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.415 MO HealthNet Division – Third Party Liability (TPL) Contracts

Book 5, page 139

This section provides funding to contract for the identification and collection of resources available to Medicaid recipients from third party sources. The TPL contractors recover from third party sources in cases where liability has not yet been determined, the third party resources were not known at the time of the Medicaid payment and/or for services which are federally mandated to be paid and then pursued for payment, e.g., prenatal medical care, preventive pediatric care, EPSDT and medical support cases.

Legal Base: RSMo 208.153 and 208.215; Federal – Social Security Act Section Number: 1902, 1903, 1906, 1912, 1917 and 42 CFR 433 Subpart D
Funding Sources: Federal and Third-Party Liability Collections (TPL)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

No changes

CONFERENCE:

No changes

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.415														
TPL CONTRACTS - 90515C														
CORE														
EXPENSE & EQUIPMENT	5,107,924	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00
FEDERAL FUNDS	2,553,962	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00
OTHER FUNDS	2,553,962	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00
TOTAL	\$5,107,924	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00
TOTAL - TPL CONTRACTS	\$5,107,924	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.420 **MO HealthNet Divisions – Information Systems**

Book 5, page 148

This section provides funding for contractor fees associated with the operation of Missouri's Medicaid Management Information System and the Medicaid Fraud and Abuse Detection system (FADS). MMIS is an automated Medicaid claims payment system.

Legal Base: RSMo 208.201; Federal – Social Security Act Section Number: 1903(a) (3), and 42 CFR 433 Subpart C
Funding Sources: General Revenue, Federal, and Healthcare Technology Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

Core Reduction: (\$88,439) GR EE core reduction – 2% Professional Services reduction

CONFERENCE:

Core Restoration: \$88,439 GR EE core restoration

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.420														
INFORMATION SYSTEMS - 90522C														
CORE														
EXPENSE & EQUIPMENT	46,319,408	0.00	37,719,110	0.00	37,719,110	0.00	37,719,110	0.00	37,719,110	0.00	37,630,671	0.00	37,719,110	0.00
GENERAL REVENUE	4,693,772	0.00	4,838,940	0.00	4,838,940	0.00	4,838,940	0.00	4,838,940	0.00	4,750,501	0.00	4,838,940	0.00
FEDERAL FUNDS	40,188,971	0.00	32,880,170	0.00	32,880,170	0.00	32,880,170	0.00	32,880,170	0.00	32,880,170	0.00	32,880,170	0.00
OTHER FUNDS	1,436,665	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	0	0.00	8,716,867	0.00	8,716,867	0.00	8,716,867	0.00	8,716,867	0.00	8,716,867	0.00	8,716,867	0.00
FEDERAL FUNDS	0	0.00	6,695,180	0.00	6,695,180	0.00	6,695,180	0.00	6,695,180	0.00	6,695,180	0.00	6,695,180	0.00
OTHER FUNDS	0	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00
TOTAL	\$46,319,408	0.00	\$46,435,977	0.00	\$46,435,977	0.00	\$46,435,977	0.00	\$46,435,977	0.00	\$46,347,538	0.00	\$46,435,977	0.00

Sustaining MHD Technology Infr - 1886006

PROGRAM-SPECIFIC	0	0.00	0	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00	2,500,000	0.00	5,000,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	875,000	0.00	875,000	0.00	875,000	0.00	250,000	0.00	875,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	4,125,000	0.00	4,125,000	0.00	4,125,000	0.00	2,250,000	0.00	4,125,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$2,500,000	0.00	\$5,000,000	0.00

Funding is requested to ensure that the Medicaid Management Information System (MMIS) is in compliance with federal requirements; to make changes to MMIS to comply with core operating rules; to standardize claims and business transactions; implement ICD-10 (federal deadline of Oct 2014); and begin reprocurement process for services provided under the MMIS and Clinical Management System for Pharmacy Claims and Prior Authorization (CMSP). SENATE: Only left funding for the revisions for ICD-10. GR \$250,00 and FED \$2,250,000 TAFP: Same as Governor recommendation.

Medicaid expansion - 1886019

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	5,850,000	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	585,000	0.00	0	0.00	0	0.00	0	0.00

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.420														
INFORMATION SYSTEMS - 90522C														
Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	5,850,000	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	5,265,000	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$5,850,000	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														

TOTAL - INFORMATION SYSTEMS	\$46,319,408	0.00	\$46,435,977	0.00	\$51,435,977	0.00	\$57,285,977	0.00	\$51,435,977	0.00	\$48,847,538	0.00	\$51,435,977	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.422 **MO HealthNet Divisions – Fraud/Abuse Prevention and Detection System**

Book N/A

New section created by the House for the purpose of funding a state-of-the-art fully integrated healthcare fraud, waste and abuse prevention system with HITRUST certification that includes predictive modeling and analytics with a prepayment component that is accessible via the web with the capability to measure return investment performance.

Legal Base:
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
New section recommended by the House

GOVERNOR:
New section recommended by the House

HOUSE:
New section recommended by the House

SENATE:
Senate recommendation includes a 2% GR Professional Services cut of \$60,000)

CONFERENCE:
Same as House

VETOES:
NDI veto: \$12,000,000 (\$3,000,000 GR & \$9,000,000 FED) – NDI for an integrated healthcare fraud, waste and abuse system

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE

HOUSE BILL SECTION 11.422														
FRAUD PREVENTN & DETECTN SYSTM - 90520C														
Fraud Prevention & Detection - 1886031														
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	0	0.00	12,000,000	0.00	11,940,000	0.00	12,000,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	3,000,000	0.00	2,940,000	0.00	3,000,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	9,000,000	0.00	9,000,000	0.00	9,000,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$12,000,000	0.00	\$11,940,000	0.00	\$12,000,000	0.00
For the purpose of funding a state-of-the-art fully integrated healthcare fraud, waste and abuse prevention system with HITRUST certification that includes predictive modeling and analytics with a prepayment review component that is accessible via the web with the cabability to measure return investment performance.														

TOTAL - FRAUD PREVENTN & DETECTN SYS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$12,000,000	0.00	\$11,940,000	0.00	\$12,000,000	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.425 MO HealthNet Division – Electronic Health Records Incentive

Book 5, page 165

This section provides funding for Missouri's MO HealthNet Electronic Health Record (EHR) Incentive program as established by the American Recovery and Reinvestment Act. The EHR Incentive program provides incentive payments for the adoption and meaningful use of certified EHR technology. These incentives are based on the provider's participation in Medicaid programs. The EHR Incentive program provides payments to eligible professionals and eligible hospitals for efforts to adopt, implement, or upgrade to certified EHR technology. Under the program, eligible professionals can receive up to \$63,750 in incentive payments over 6 years and hospital amounts are based on an established formula. The funding for this program was added to the budget in FY 2012

Legal Base: Federal Law - ARRA Section 4201; Federal Regulation – 42 CFR Parts 412,413, 422, & 495
Funding Sources: Federal
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Core Reduction: (\$15,000,000) FED PSD core reduction based on expected expenditures for FY 2015

GOVERNOR:

Same as Department – no additional changes

HOUSE:

Same as Department – no additional changes

SENATE:

Same as Department – no additional changes

CONFERENCE:

Same as Department – no additional changes

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.425														
ELECTRONIC HLTH RECORDS INCNTV - 90523C														
CORE														
EXPENSE & EQUIPMENT	803,561	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	803,561	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	61,877,208	0.00	100,000,000	0.00	85,000,000	0.00	85,000,000	0.00	85,000,000	0.00	85,000,000	0.00	85,000,000	0.00
FEDERAL FUNDS	61,877,208	0.00	100,000,000	0.00	85,000,000	0.00	85,000,000	0.00	85,000,000	0.00	85,000,000	0.00	85,000,000	0.00
TOTAL	\$62,680,769	0.00	\$100,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00
TOTAL - ELECTRONIC HLTH RECORDS INCN	\$62,680,769	0.00	\$100,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.430 **MO HealthNet Division – Money Follows the Person Grant Program**

Book 5, page 172

This section provides funding the administration of the Money Follows the Person Grant Program. This demonstration grant program aides in the transition of individuals who are elderly, disabled or who have developmental disabilities from nursing facilities or state owned habilitation centers to Home and Community Based Services.

Legal Base: Section 6071 of the Federal Deficit Reduction Act of 2005; PL 109-171
Funding Sources: Federal Funds
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

No changes

CONFERENCE:

No changes

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Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.430														
MONEY FOLLOWS THE PERSON GRANT - 90524C														
CORE														
EXPENSE & EQUIPMENT	0	0.00	127,852	0.00	127,852	0.00	127,852	0.00	127,852	0.00	127,852	0.00	127,852	0.00
FEDERAL FUNDS	0	0.00	127,852	0.00	127,852	0.00	127,852	0.00	127,852	0.00	127,852	0.00	127,852	0.00
PROGRAM-SPECIFIC	0	0.00	404,697	0.00	404,697	0.00	404,697	0.00	404,697	0.00	404,697	0.00	404,697	0.00
FEDERAL FUNDS	0	0.00	404,697	0.00	404,697	0.00	404,697	0.00	404,697	0.00	404,697	0.00	404,697	0.00
TOTAL	\$0	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00

TOTAL - MONEY FOLLOWS THE PERSON GR	\$0	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.435 MO HealthNet Division – Adult Medicaid Quality Grant

Book 5, page 179

This section provides Federal appropriation authority to expend the Adult Medicaid Quality Measures grant. The purpose of is grant is to show how MO HealthNet will (a) test and evaluate methods for collections and reporting of the Initial Core Set Measures in varying delivery settings; (b) develop staff capacity to report data, analyze and use the data for monitoring and improving access and the quality of care in Medicaid; and (c) conduct at least two Medicaid quality improvement projects related to the Initial Core Measures.

Legal Base: Section 2701 of Health Care and Education Reconciliation Act
Funding Sources: Federal Funds
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
No changes

GOVERNOR:
No changes

HOUSE:
No changes

SENATE:
No changes

CONFERENCE:
No changes

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Committee Markup Annual		FY 2015 - HB 2011 SOCIAL SERVICES										Regular House Bills			
	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.435															
ADULT MEDICAID QUALITY GRANT - 90529C															
CORE															
EXPENSE & EQUIPMENT	0	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	
FEDERAL FUNDS	0	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	
TOTAL	\$0	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.440 MO HealthNet Division – Title XIX - Pharmacy Services

Book 5, page 186

This section provides Medicaid funding for qualifying prescription drugs supplied by manufacturers for which there exists a rebate agreement between the manufacturer and the state or the federal department of Health and Human Services. In addition, this section provides funding for professional fees for pharmacists.

Legal Base: RSMo 208.152 and 208.166; Federal – Social Security Act Section Number: 1902(a) (12), and 42 CFR 440.120
Funding Sources: General Revenue, Federal, Pharmacy Rebates (REBATE), Health Initiatives (HIF), Pharmacy Federal Reimbursement Allowance (PFRA), Healthy Families Trust Fund Health Care Account (HFTF), Third Party Liability Collections Fund, and Premium Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core Reduction: (\$14,950,905) OTHER PSD core reduction in Pharmacy Rebate funds due to less than expected collections – corresponding NDI from GR

GOVERNOR:

Core Reallocation In: \$42,811,789 GR PSD reallocated in from Medicare Clawback Part D (\$19,408,350); Nursing Facilities (\$7,099,169); Rehab & Specialty (\$7,137,953); Physician (\$1,900,340); Hospital (\$4,883,543); PACE (\$11,415); Dental (\$110,624); Home Health (\$52,512); NEMT (\$530,737); Hospital (\$1,645,885); and Women’s Health (\$31,261)

HOUSE:

Core Reallocation Out: (\$42,811,789) GR PSD reallocated out to various Medicaid programs – reversed the Governor’s core reallocations
Core Reduction: (\$5,566,822) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$3,167,698) PSD (GR \$617,764; FED \$1,760,276; & OTH \$789,658) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI
(\$1,630,000) PSD (GR \$601,551 & FED \$1,028,449) core reduction due to estimated savings related to Adult Therapies Benefits addition
(\$1,094,975) PSD (GR \$404,101 & FED \$690,874) core reduction due to estimated savings related to Adult Dental Coverage addition
(\$1,000,000) GR PSD core reduction – fund switch to Pharmacy Tax due to estimated savings related to added benefits
(\$912,936) (GR \$207,578 EE & \$705,358 PSD) core reduction

SENATE:

Core Restoration: \$1,630,000 (GR \$601,551 PSD & FED \$1,028,449 PSD) core restoration of House savings related to the addition of Adult Therapies Benefits

CONFERENCE:

Core Reduction: (\$1,630,000) PSD (GR \$601,551 & FED \$1,028,449) core reduction due to estimated savings related to Adult Therapies Benefits addition
(\$41,144,012) GR PSD core reduction – due to an expected increase in the Tobacco Master Settlement Agreement (MSA) funds, approximately \$50 million, as a result of a ruling by Judge Jimmie Edwards that partially vacated a 2013 arbitration ruling that pertains to the MSA – remaining amount of \$8,855,988 was taken from NDI MHD GR pickup #1886002

VETOES:

NDI veto: \$500,000 GR – NDI for clinical medication therapy services (MTS) and medication synchronization

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	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.440														
PHARMACY - 90541C														
CORE														
EXPENSE & EQUIPMENT	1,613,088	0.00	415,156	0.00	415,156	0.00	415,156	0.00	207,578	0.00	207,578	0.00	207,578	0.00
GENERAL REVENUE	1,599,975	0.00	207,578	0.00	207,578	0.00	207,578	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	13,113	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00
PROGRAM-SPECIFIC	909,472,778	0.00	954,284,400	0.00	939,333,495	0.00	982,145,284	0.00	926,168,642	0.00	927,798,642	0.00	885,024,630	0.00
GENERAL REVENUE	65,588,816	0.00	50,039,608	0.00	50,039,608	0.00	92,851,397	0.00	41,144,012	0.00	41,745,563	0.00	0	0.00
FEDERAL FUNDS	575,731,566	0.00	599,427,937	0.00	599,427,937	0.00	599,427,937	0.00	595,948,338	0.00	596,976,787	0.00	595,948,338	0.00
OTHER FUNDS	268,152,396	0.00	304,816,855	0.00	289,865,950	0.00	289,865,950	0.00	289,076,292	0.00	289,076,292	0.00	289,076,292	0.00
TOTAL	\$911,085,866	0.00	\$954,699,556	0.00	\$939,748,651	0.00	\$982,560,440	0.00	\$926,376,220	0.00	\$928,006,220	0.00	\$885,232,208	0.00

MHD Cost to Continue - 1886008														
PROGRAM-SPECIFIC	0	0.00	0	0.00	26,840,411	0.00	0	0.00	19,785,785	0.00	19,785,785	0.00	19,785,785	0.00
GENERAL REVENUE	0	0.00	0	0.00	26,840,411	0.00	0	0.00	18,913,604	0.00	6,413,604	0.00	6,413,604	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	872,181	0.00	872,181	0.00	872,181	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	12,500,000	0.00	12,500,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$26,840,411	0.00	\$0	0.00	\$19,785,785	0.00	\$19,785,785	0.00	\$19,785,785	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections. Senate rec for Pharmacy section includes a fund switch of \$10 million of GR to Surplus Revenue Fund and \$2.5 million of GR to Pharmacy Rebates Fund. TAFP rec same as Senate.

MHD GR Pickup - 1886002														
PROGRAM-SPECIFIC	0	0.00	0	0.00	14,950,905	0.00	3,227,722	0.00	14,950,905	0.00	14,950,905	0.00	6,094,917	0.00

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	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE

HOUSE BILL SECTION 11.440														
PHARMACY - 90541C														
MHD GR Pickup - 1886002														
PROGRAM-SPECIFIC	0	0.00	0	0.00	14,950,905	0.00	3,227,722	0.00	14,950,905	0.00	14,950,905	0.00	6,094,917	0.00
GENERAL REVENUE	0	0.00	0	0.00	14,950,905	0.00	3,227,722	0.00	14,950,905	0.00	14,950,905	0.00	6,094,917	0.00
TOTAL	\$0	0.00	\$0	0.00	\$14,950,905	0.00	\$3,227,722	0.00	\$14,950,905	0.00	\$14,950,905	0.00	\$6,094,917	0.00

General Revenue funding is requested to replace Pharmacy Rebates funding (\$14,950,905). Revenues are projected to be less than appropriated amounts in FY 2014. In addition, the FY 2014 budget included the Missouri Senior Services Protection Fund in Blind Medical (\$21,489,941) (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) and Federally Qualified Health Center (\$3,270,000) programs as one-time. GR is requested to replace this one-time funding. General Revenue is requested to replace Blind Pension Premium Fund (\$3,632,576) budgeted in Blind Pension Medical -- (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) Also, GR is requested to replace one-time Premium Fund cash balance in Hospital program (\$10,011,950). Senate rec includes a fund switch of \$2.5 million of GR to Premium Fund in Hospital section. Conference Committee rec includes a fund switch of \$8,855,988 of GR to Tobacco funds in the Pharmacy section.

Pharmacy PMPM Increase - 1886010														
PROGRAM-SPECIFIC	0	0.00	0	0.00	40,032,594	0.00	25,273,062	0.00	35,178,963	0.00	35,178,963	0.00	35,178,963	0.00
GENERAL REVENUE	0	0.00	0	0.00	15,200,376	0.00	0	0.00	9,905,901	0.00	9,905,901	0.00	9,905,901	0.00
FEDERAL FUNDS	0	0.00	0	0.00	24,832,218	0.00	25,273,062	0.00	25,273,062	0.00	25,273,062	0.00	25,273,062	0.00
TOTAL	\$0	0.00	\$0	0.00	\$40,032,594	0.00	\$25,273,062	0.00	\$35,178,963	0.00	\$35,178,963	0.00	\$35,178,963	0.00

This decision item requests funding for the on-going inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures due to increased utilization and therapies.

FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	5,566,822	0.00	5,566,822	0.00	5,566,822	0.00	5,566,822	0.00

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	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.440														
PHARMACY - 90541C														
FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	5,566,822	0.00	5,566,822	0.00	5,566,822	0.00	5,566,822	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	5,566,822	0.00	5,566,822	0.00	5,566,822	0.00	5,566,822	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$5,566,822	0.00	\$5,566,822	0.00	\$5,566,822	0.00	\$5,566,822	0.00
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.														

Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(19,823,392)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(14,135,095)	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	(3,346,174)	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	(2,342,123)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$19,823,392)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														

Pharmacy Reimbursement Allow - 1886033														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00

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	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.440														
PHARMACY - 90541C														
Pharmacy Reimbursement Allow - 1886033														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00
Adds authority from the Pharmacy Reimbursement Allowance Fund (0144) due to increased provider tax revenues from increase prescriptions (as a savings related to added benefits). See GR reduction in core.														

Med Sync for MTS - 1886054														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	500,000	0.00	500,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	500,000	0.00	500,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$500,000	0.00	\$500,000	0.00
Senate additional of \$500,000 GR to provide funding for clinical medication therapy services (MTS) and medication synchronization provided by pharmacists with MTS Certificates														

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Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.440														
PHARMACY - 90541C														
GR fund switch to Tobacco fund - 1886055														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	50,000,000	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	50,000,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$50,000,000	0.00

the conference committee exceeded the difference in the Pharmacy section to fund switch \$50 million of GR funds to \$12.5 million of the Life Science Research Trust Fund and \$37.5 million of Healthy Family Trust Fund from the Tobacco Master Settlement Agreement. On May 2, 2014, Judge Jimmie Edwards partially vacated a 2013 arbitration panel ruling and ruled that Missouri should receive \$50 million of the \$70 million originally lost from the arbitration ruling.

TOTAL - PHARMACY	\$911,085,866	0.00	\$954,699,556	0.00	\$1,021,572,561	0.00	\$996,804,654	0.00	\$1,002,858,695	0.00	\$1,004,988,695	0.00	\$1,003,358,695	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.440 continued MO HealthNet Division – Pharmacy Medicare Part D-Clawback

Book 5, Page 199

This section provides funding for a transfer from the Pharmacy section for “Clawback” payments to the federal government. Part D of the Federal Medicare Prescription Drug Act requires states to pay Medicare a portion of the cost of Part D drugs attributable to what would have been paid for by the State absent the Part D drug benefit. Beginning January 1, 2006, the state is required to pay Medicare 90% of an average per person drug cost for each of the state’s full-benefit dual eligible individuals for each month.

Legal Basis: Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003.
Funding Sources: General Revenue
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$19,408,350) GR PSD reallocated out to Pharmacy – lower projected cost for FY 2015

HOUSE:

Core Reallocation In: \$19,408,350 GR PSD reallocated back in from Pharmacy – reversed the Governor’s core reallocation
Core Reduction: (\$20,381,218) GR PSD core reduction due to lapse from change in the state’s phase-down contribution percentage of Clawback payment
(\$5,000,000) GR PSD core reduction

SENATE:

Core Reduction: (\$1,750,955) GR EE core reduction – 1% reduction

CONFERENCE:

Same as Senate – no additional changes

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Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.440														
PHARMACY-MED PART D-CLAWBACK - 90543C														
CORE														
PROGRAM-SPECIFIC	193,470,530	0.00	200,480,745	0.00	200,480,745	0.00	181,072,395	0.00	175,099,527	0.00	173,348,532	0.00	173,348,532	0.00
GENERAL REVENUE	193,470,530	0.00	200,480,745	0.00	200,480,745	0.00	181,072,395	0.00	175,099,527	0.00	173,348,532	0.00	173,348,532	0.00
TOTAL	\$193,470,530	0.00	\$200,480,745	0.00	\$200,480,745	0.00	\$181,072,395	0.00	\$175,099,527	0.00	\$173,348,532	0.00	\$173,348,532	0.00

TOTAL - PHARMACY-MED PART D-CLAWBAC	\$193,470,530	0.00	\$200,480,745	0.00	\$200,480,745	0.00	\$181,072,395	0.00	\$175,099,527	0.00	\$173,348,532	0.00	\$173,348,532	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.440 continued MO HealthNet Division – Missouri RX Plan

Book 5, page 206

This section provides funding for the MO RX Plan under the MMA Medicare Part D Prescription Drug plan. Part D of the Federal Medicare Prescription Drug Act requires states to pay Medicare a portion of the cost of Part D drugs attributable to what would have been paid for by the State absent the Part D drug benefit. Beginning January 1, 2006, the state is required to pay Medicare 90% of an average per person drug cost for each of the state's full-benefit dual eligibles for each month.

Legal Basis: Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003.

Funding Sources: General Revenue, Missouri Rx Plan and Health Families Trust Fund

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

No changes

CONFERENCE:

No changes

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Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.440														
MISSOURI RX PLAN - 90538C														
CORE														
PROGRAM-SPECIFIC	20,274,962	0.00	23,753,091	0.00	23,753,091	0.00	23,753,091	0.00	23,753,091	0.00	23,753,091	0.00	23,753,091	0.00
GENERAL REVENUE	0	0.00	6,370,046	0.00	6,370,046	0.00	6,370,046	0.00	6,370,046	0.00	6,370,046	0.00	6,370,046	0.00
OTHER FUNDS	20,274,962	0.00	17,383,045	0.00	17,383,045	0.00	17,383,045	0.00	17,383,045	0.00	17,383,045	0.00	17,383,045	0.00
TOTAL	\$20,274,962	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00
TOTAL - MISSOURI RX PLAN	\$20,274,962	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.445 MO HealthNet Division – Pharmacy Federal Reimbursement Allowance Payments

Book 5, page 214

This section provides funding for Pharmacy Reimbursement Allowance payments as provided by law.

Legal Base: RSMo 338.500; Federal – Social Security Act Section Number 1903 (w), 42 CFR 443 Subpart B.
Funding Sources: Pharmacy Federal Reimbursement Allowance (PFRA)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

No changes

CONFERENCE:

No changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.445														
PHARMACY FRA - 90542C														
CORE														
PROGRAM-SPECIFIC	93,883,165	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00
OTHER FUNDS	93,883,165	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00
TOTAL	\$93,883,165	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00
TOTAL - PHARMACY FRA	\$93,883,165	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.450 & 11.455 MO HealthNet Division – Pharmacy Provider Tax Transfers

Book 5, Pages 221 & 227

These sections provide the mechanism to transfer funding between General Revenue and the Pharmacy Federal Reimbursement Allowance Fund for the pharmacy reimbursement program.

Funding Sources: General Revenue and Pharmacy Federal Reimbursement Allowance (PFRA)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
Requested an “E”

GOVERNOR:
Recommended an “E”

HOUSE:
House removed the “E”

SENATE:
Same as House – no additional changes

CONFERENCE:
Same as House – no additional changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.450														
GR PHARMACY FRA TRANSFER - 90535C														
CORE														
FUND TRANSFERS	35,538,786	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00
GENERAL REVENUE	35,538,786	0.00	35,764,609	0.00	35,764,609 E	0.00	35,764,609 E	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00
TOTAL	\$35,538,786	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00
TOTAL - GR PHARMACY FRA TRANSFER	\$35,538,786	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00

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Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.455														
PHARMACY FRA TRANSFER - 90537C														
CORE														
FUND TRANSFERS	35,538,786	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00
OTHER FUNDS	35,538,786	0.00	35,764,609	0.00	35,764,609E	0.00	35,764,609E	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00
TOTAL	\$35,538,786	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00

TOTAL - PHARMACY FRA TRANSFER	\$35,538,786	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.460 MO HealthNet Division – Title XIX - Physician's Services

Book 5, page 233

This section provides funding for all non-institutional physician-related services provided to eligible Title XIX recipients. Covered services include office, hospital and nursing home visits; obstetrical services; and typical medical procedures including surgeries, anesthesiology, pathology, laboratory and radiology.

Legal Base: RSMo 208.152 and 208.166; Federal – Social Security Act Section Number: 1905(a) (2), (3), (5), (6), (9), (17), (21), 1905(r), 1915(d), 42 CFR 440.210, 440.500, 412.113(c), and 441-Subpart B

Funding Sources: General Revenue, Federal, Health Initiatives (HIF), Healthy Families Trust Fund – Health Care Account (HFTF), and Third Party Liability Collections Fund

FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$5,435,761) GR PSD reallocated out to Pharmacy - \$1,900,340; Medicare Part A & B - \$2,622,698; CHIP - \$13,307; and Blind Medical - \$899,416

HOUSE:

Core Reallocation In: \$5,435,761 GR PSD reallocated back in – reversed the Governor’s core reallocation

Core Reduction: (\$10,932,699) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

(\$918,042) PSD (GR \$238,488 & FED \$679,554) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI

SENATE:

Core Reduction: (\$40,500) GR EE core reduction – 2% Professional Services reduction

CONFERENCE:

Core Restoration: \$40,500 GR EE core restoration

VETOES:

NDI veto: \$10,838,640 (\$4,000,000 GR & \$6,838,640 FED) – NDI to cover a portion of the physician rate increase provided through the ACA for CY 2013 & 2014

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Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.460														
PHYSICIAN RELATED PROF - 90544C														
CORE														
EXPENSE & EQUIPMENT	3,894,775	0.00	5,500,000	0.00	5,500,000	0.00	5,500,000	0.00	5,500,000	0.00	5,459,500	0.00	5,500,000	0.00
GENERAL REVENUE	1,720,958	0.00	2,700,000	0.00	2,700,000	0.00	2,700,000	0.00	2,700,000	0.00	2,659,500	0.00	2,700,000	0.00
FEDERAL FUNDS	2,041,317	0.00	2,800,000	0.00	2,800,000	0.00	2,800,000	0.00	2,800,000	0.00	2,800,000	0.00	2,800,000	0.00
OTHER FUNDS	132,500	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	603,244,366	0.00	665,556,989	0.00	665,556,989	0.00	660,121,228	0.00	653,706,248	0.00	653,706,248	0.00	653,706,248	0.00
GENERAL REVENUE	201,995,502	0.00	209,403,482	0.00	209,403,482	0.00	203,967,721	0.00	198,232,295	0.00	198,232,295	0.00	198,232,295	0.00
FEDERAL FUNDS	392,039,954	0.00	448,675,392	0.00	448,675,392	0.00	448,675,392	0.00	447,995,838	0.00	447,995,838	0.00	447,995,838	0.00
OTHER FUNDS	9,208,910	0.00	7,478,115	0.00	7,478,115	0.00	7,478,115	0.00	7,478,115	0.00	7,478,115	0.00	7,478,115	0.00
TOTAL	\$607,139,141	0.00	\$671,056,989	0.00	\$671,056,989	0.00	\$665,621,228	0.00	\$659,206,248	0.00	\$659,165,748	0.00	\$659,206,248	0.00

MHD Cost to Continue - 1886008														
PROGRAM-SPECIFIC	0	0.00	0	0.00	4,896,953	0.00	0	0.00	1,681,029	0.00	1,681,029	0.00	1,681,029	0.00
GENERAL REVENUE	0	0.00	0	0.00	4,896,953	0.00	0	0.00	1,681,029	0.00	1,681,029	0.00	1,681,029	0.00
TOTAL	\$0	0.00	\$0	0.00	\$4,896,953	0.00	\$0	0.00	\$1,681,029	0.00	\$1,681,029	0.00	\$1,681,029	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections. Senate rec for Pharmacy section includes a fund switch of \$10 million of GR to Surplus Revenue Fund and \$2.5 million of GR to Pharmacy Rebates Fund. TAFP rec same as Senate.

FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	10,932,699	0.00	10,932,699	0.00	10,932,699	0.00	10,932,699	0.00

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Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.460														
PHYSICIAN RELATED PROF - 90544C														
FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	10,932,699	0.00	10,932,699	0.00	10,932,699	0.00	10,932,699	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	10,932,699	0.00	10,932,699	0.00	10,932,699	0.00	10,932,699	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$10,932,699	0.00	\$10,932,699	0.00	\$10,932,699	0.00	\$10,932,699	0.00

This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.

Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(11,002,715)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(9,710,926)	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	(1,291,789)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$11,002,715)	0.00	\$0	0.00	\$0	0.00	\$0	0.00

Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.

Primary Care Physician Rate - 1886036														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	26,771,251	0.00	5,553,242	0.00	10,838,640	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	9,879,930	0.00	2,000,000	0.00	4,000,000	0.00

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	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.460														
PHYSICIAN RELATED PROF - 90544C														
Primary Care Physician Rate - 1886036														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	26,771,251	0.00	5,553,242	0.00	10,838,640	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	16,891,321	0.00	3,553,242	0.00	6,838,640	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$26,771,251	0.00	\$5,553,242	0.00	\$10,838,640	0.00
Federal law allows payments for primary care services furnished by a physician with a primary specialty of family medicine, general internal medicine or pediatric medicine be paid at parity with Medicare beginning January 1, 2013. Federal match of 100% ends December 31, 2014. The increase is to continue the program from January through June of FY 2015 @ 82.5% of gap. TAFP rec would cover approximately 33.4% of the gap between Medicare and Medicaid.													Vetred	

TOTAL - PHYSICIAN RELATED PROF	\$607,139,141	0.00	\$671,056,989	0.00	\$675,953,942	0.00	\$665,551,212	0.00	\$698,591,227	0.00	\$677,332,718	0.00	\$682,658,616	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.465

MO HealthNet Divisions – Title XIX - Dental Services

Book 5, page 249

This section provides funding to reimburse dentists enrolled in the Missouri Medicaid program.

Legal Base: RSMo 208.152 and 208.166; Federal – Social Security Act Section Number: 1905(a) (10), 42 CFR 440.100
Fund Sources: General Revenue, Federal, Health Initiatives (HIF), and Healthy Families Trust Fund – Health Care Account (HFTF)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$110,624) GR PSD reallocated out to Pharmacy

HOUSE:

Core Reallocation In: \$110,624 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$198,449) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$110,624) GR PSD core reduction due to estimated lapse

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

VETOES:

Core veto: \$1,250,000 (\$500,000 GR & \$750,000 FED) – core funding for pilot project with rural health clinics

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FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.465														
DENTAL - 90546C														
CORE														
EXPENSE & EQUIPMENT	402,522	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	402,522	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	16,014,002	0.00	17,978,686	0.00	17,978,686	0.00	17,868,062	0.00	17,669,613	0.00	17,669,613	0.00	17,669,613	0.00
GENERAL REVENUE	6,381,450	0.00	5,906,020	0.00	5,906,020	0.00	5,795,396	0.00	5,596,947	0.00	5,596,947	0.00	5,596,947	0.00
FEDERAL FUNDS	8,714,752	0.00	11,152,731	0.00	11,152,731	0.00	11,152,731	0.00	11,152,731	0.00	11,152,731	0.00	11,152,731	0.00
OTHER FUNDS	917,800	0.00	919,935	0.00	919,935	0.00	919,935	0.00	919,935	0.00	919,935	0.00	919,935	0.00
TOTAL	\$16,416,524	0.00	\$17,978,686	0.00	\$17,978,686	0.00	\$17,868,062	0.00	\$17,669,613	0.00	\$17,669,613	0.00	\$17,669,613	0.00

*Vetoed \$1.25M
6R \$500,000
FEU \$750,000
for pilot project w/ rural
health Clinics.*

FMAP Adjustment - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	198,449	0.00	198,449	0.00	198,449	0.00	198,449	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	198,449	0.00	198,449	0.00	198,449	0.00	198,449	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$198,449	0.00	\$198,449	0.00	\$198,449	0.00	\$198,449	0.00

This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.465														
DENTAL - 90546C														
Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(199,476)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(199,476)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$199,476)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														
Adult Dental Benefits - 1886037														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	48,231,947	0.00	48,231,947	0.00	48,231,947	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	17,800,000	0.00	17,800,000	0.00	17,800,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	30,431,947	0.00	30,431,947	0.00	30,431,947	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$48,231,947	0.00	\$48,231,947	0.00	\$48,231,947	0.00
Provides dental coverage for all Medicaid eligible adults. Currently, dental care for adults is only accessible to address trauma or when medically necessary. Individuals in a nursing facility or in an eligibility category for the blind or pregnant have comprehensive benefits (including dental). Dental benefits for children are currently covered. SENATE: Intent is to fund a limited dental benefit for those Medicaid eligible adults who currently do not have dental benefits. Approximatey \$30,431,947 will be used to fund codes in the Tiers 1-6 for these adults at 60% of UCR; \$1 million will be used to fund 4 regional ER dental diversion pilot projects; & remaining \$16.8 million will be used to raise the reimbursement rates for these same codes in the Tiers 1-6 for the Medicaid individuals who currently have dental benefits. TAFP rec same as Senate.														
TOTAL - DENTAL	\$16,416,524	0.00	\$17,978,686	0.00	\$17,978,686	0.00	\$17,867,035	0.00	\$66,100,009	0.00	\$66,100,009	0.00	\$66,100,009	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.470 MO HealthNet Division – Title XIX - Medicare and Other Health Insurance Premiums

Book 5, page 259

This section provides funding for Medicare Part A (hospital) and Part B (medical) premiums as well as group health insurance premiums when it is more cost effective to do so rather than pay for an equivalent set of services with state funds (Medicaid).

Legal Base: RSMo 208.153; Federal – Social Security Act Section Number: 1905(p) (1), 1902(a) (10), 1906, 42 CFR 406.26 and 431.625
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation In: \$2,622,698 GR PSD reallocated in from Physician services

HOUSE:

Core Reallocation Out: (\$2,622,698) GR PSD reallocated back out – reversed the Governor’s core reallocation
Core Reduction: (\$2,362,700) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$250,000) GR PSD core reduction

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470														
PREMIUM PAYMENTS - 90547C														
CORE														
PROGRAM-SPECIFIC	178,886,284	0.00	181,712,730	0.00	181,712,730	0.00	184,335,428	0.00	179,100,030	0.00	179,100,030	0.00	179,100,030	0.00
GENERAL REVENUE	66,023,871	0.00	67,609,776	0.00	67,609,776	0.00	70,232,474	0.00	64,997,076	0.00	64,997,076	0.00	64,997,076	0.00
FEDERAL FUNDS	112,862,413	0.00	114,102,954	0.00	114,102,954	0.00	114,102,954	0.00	114,102,954	0.00	114,102,954	0.00	114,102,954	0.00
TOTAL	\$178,886,284	0.00	\$181,712,730	0.00	\$181,712,730	0.00	\$184,335,428	0.00	\$179,100,030	0.00	\$179,100,030	0.00	\$179,100,030	0.00

MHD Cost to Continue - 1886008														
PROGRAM-SPECIFIC	0	0.00	0	0.00	18,020,845	0.00	11,077,625	0.00	13,193,695	0.00	13,193,695	0.00	13,193,695	0.00
GENERAL REVENUE	0	0.00	0	0.00	6,943,220	0.00	0	0.00	3,764,078	0.00	3,764,078	0.00	3,764,078	0.00
FEDERAL FUNDS	0	0.00	0	0.00	11,077,625	0.00	11,077,625	0.00	9,429,617	0.00	9,429,617	0.00	9,429,617	0.00
TOTAL	\$0	0.00	\$0	0.00	\$18,020,845	0.00	\$11,077,625	0.00	\$13,193,695	0.00	\$13,193,695	0.00	\$13,193,695	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections. Senate rec for Pharmacy section includes a fund switch of \$10 million of GR to Surplus Revenue Fund and \$2.5 million of GR to Pharmacy Rebates Fund. TAFP rec same as Senate.

Medicare Premium Increase - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	8,319,792	0.00	5,563,071	0.00	8,319,792	0.00	5,563,071	0.00	5,563,071	0.00
GENERAL REVENUE	0	0.00	0	0.00	3,029,916	0.00	2,053,051	0.00	3,070,419	0.00	2,053,051	0.00	2,053,051	0.00

Committee Markup Annual

Committee Markup Annual		FY 2015 - HB 2011 SOCIAL SERVICES										Regular House Bills		
FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED		
DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.470														
PREMIUM PAYMENTS - 90547C														
Medicare Premium Increase - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	8,319,792	0.00	5,563,071	0.00	8,319,792	0.00	5,563,071	0.00	5,563,071	0.00
FEDERAL FUNDS	0	0.00	0	0.00	5,289,876	0.00	3,510,020	0.00	5,249,373	0.00	3,510,020	0.00	3,510,020	0.00
TOTAL	\$0	0.00	\$0	0.00	\$8,319,792	0.00	\$5,563,071	0.00	\$8,319,792	0.00	\$5,563,071	0.00	\$5,563,071	0.00
Federal law mandates that the Medicare Part A and Part B premiums cover a certain percentage of the cost of the Medicare program. The Medicaid program pays these premiums for Medicare/Medicaid dual eligibles. Funding is requested for anticipated increases in Medicare Part A (\$7 increase) and Part B (\$5 increase). The Governor's Rec is based on better FMAP rate information. Senate rec is based on Governor's Amendment #2010-03 dated 3/10/2014.														

FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,362,700	0.00	2,362,700	0.00	2,362,700	0.00	2,362,700	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	2,362,700	0.00	2,362,700	0.00	2,362,700	0.00	2,362,700	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$2,362,700	0.00	\$2,362,700	0.00	\$2,362,700	0.00	\$2,362,700	0.00
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.														

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES														Regular House Bills	
FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED			
DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470															
PREMIUM PAYMENTS - 90547C															
Medicaid expansion - 1886019															
PROGRAM-SPECIFIC		0	0.00	0	0.00	0	0.00	(744,484)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE		0	0.00	0	0.00	0	0.00	(744,484)	0.00	0	0.00	0	0.00	0	0.00
TOTAL		\$0	0.00	\$0	0.00	\$0	0.00	(\$744,484)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.															

TOTAL - PREMIUM PAYMENTS	\$178,886,284	0.00	\$181,712,730	0.00	\$208,053,367	0.00	\$202,594,340	0.00	\$202,976,217	0.00	\$200,219,496	0.00	\$200,219,496	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.475 MO HealthNet Division – Title XIX - Nursing Facility Payments

Book 5, page 276

This section provides funding for the care of Medicaid patients in nursing facilities.

Legal Base: RSMo 208.152 and 208.153; Federal – Social Security Act Section Number: 1905(a) (4), 42 CFR 440.40 and 440.210
Funding Sources: General Revenue, Federal, Uncompensated Care (UC), Healthy Families Trust Fund – Health Care Account (HFTF), and Third Party Liability Collections Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Transfer Out: (\$16,655,337) (GR \$6,146,652 PSD & FED \$10,508,685 PSD) transferred to Mental Health for the transition of Nursing Home individuals to a community setting
Core Reallocation Out: (\$7,099,169) GR PSD core reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$7,099,169 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$7,099,169) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$1,232,881) PSD (GR \$454,995 & FED \$777,886) core reduction due to estimated savings related to Adult Therapies Benefits addition

SENATE:

Core Restoration: \$1,232,881 PSD (GR \$454,995 & FED \$777,886) core restoration of House savings related to the addition of Adult Therapies Benefits

CONFERENCE:

Core Reduction: (\$1,232,881) PSD (GR \$454,995 & FED \$777,886) core reduction due to estimated savings related to Adult Therapies Benefits addition

VETOES:

NDI veto: \$22,458,680 (\$8,288,376 GR & \$14,170,304 FED) – NDI for 2% provider rate increase

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475														
NURSING FACILITIES - 90549C														
CORE														
PROGRAM-SPECIFIC	548,596,022	0.00	577,493,965	0.00	577,493,965	0.00	553,739,459	0.00	552,506,578	0.00	553,739,459	0.00	552,506,578	0.00
GENERAL REVENUE	140,444,904	0.00	149,986,646	0.00	149,986,646	0.00	136,740,825	0.00	136,285,830	0.00	136,740,825	0.00	136,285,830	0.00
FEDERAL FUNDS	339,877,400	0.00	357,245,131	0.00	357,245,131	0.00	346,736,446	0.00	345,958,560	0.00	346,736,446	0.00	345,958,560	0.00
OTHER FUNDS	68,273,718	0.00	70,262,188	0.00	70,262,188	0.00	70,262,188	0.00	70,262,188	0.00	70,262,188	0.00	70,262,188	0.00
TOTAL	\$548,596,022	0.00	\$577,493,965	0.00	\$577,493,965	0.00	\$553,739,459	0.00	\$552,506,578	0.00	\$553,739,459	0.00	\$552,506,578	0.00

FMAP Adjustment - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	7,099,169	0.00	7,099,169	0.00	7,099,169	0.00	7,099,169	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	7,099,169	0.00	7,099,169	0.00	7,099,169	0.00	7,099,169	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$7,099,169	0.00	\$7,099,169	0.00	\$7,099,169	0.00	\$7,099,169	0.00

This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.

Medicaid expansion - 1886019

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(2,382,227)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(1,369,695)	0.00	0	0.00	0	0.00	0	0.00

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475														
NURSING FACILITIES - 90549C														
Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(2,382,227)	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	(1,012,532)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$2,382,227)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														

Long Term Care Rate Increase - 1886020

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	22,458,680	0.00	22,458,680	0.00	22,458,680	0.00	22,458,680	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	8,288,376	0.00	8,288,376	0.00	8,288,376	0.00	8,288,376	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	14,170,304	0.00	14,170,304	0.00	14,170,304	0.00	14,170,304	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$22,458,680	0.00	\$22,458,680	0.00	\$22,458,680	0.00	\$22,458,680	0.00
GOVERNOR REC: Funding for a rate increase to long term care providers. Includes a \$2.50 per diem rate increase for nursing facilities with an additional \$1.25 trend factor increase from NFFRA (\$3.75 Total), and a 2% rate increase for hospice and home health providers. HOUSE COMM SUB REC: Same as Gov Rec with an additional rate increase for home health of \$1,517,410 (\$560,000 GR and \$957,410 FED).														

TOTAL - NURSING FACILITIES	\$548,596,022	0.00	\$577,493,965	0.00	\$577,493,965	0.00	\$580,915,081	0.00	\$582,064,427	0.00	\$583,297,308	0.00	\$582,064,427	0.00
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DEPARTMENT OF SOCIAL SERVICES

HB 11.475 continued **MO HealthNet Division – Home Health**

Book 5, page 288

This section provides funding for Home Health Services and PACE. These programs help Medicaid recipients remain in their home instead of seeking institutional care.

Legal Base: RSMo 208.152 and 208.168; Federal – Social Security Act Section Number: 1905(a) (7), (24), 1915(c), 42 CFR 440.170(f), 440.210, 440.130 and 440.180
Fund Sources: General Revenue, Federal, and Health Initiatives (HIF)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$52,512) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$52,512 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$52,512) GR PSD core reduction due to estimated lapse
(\$79,506) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$366,998) PSD (GR \$95,338 & FED \$271,660) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

VETOES:

NDI veto: \$1,620,174 (\$597,925 GR & \$1,022,249 FED) – NDI for provider rate increase

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475														
HOME HEALTH - 90564C														
CORE														
PROGRAM-SPECIFIC	6,421,373	0.00	6,463,900	0.00	6,463,900	0.00	6,411,388	0.00	5,964,884	0.00	5,964,884	0.00	5,964,884	0.00
GENERAL REVENUE	2,649,210	0.00	2,305,703	0.00	2,305,703	0.00	2,253,191	0.00	2,078,347	0.00	2,078,347	0.00	2,078,347	0.00
FEDERAL FUNDS	3,617,637	0.00	3,998,892	0.00	3,998,892	0.00	3,998,892	0.00	3,727,232	0.00	3,727,232	0.00	3,727,232	0.00
OTHER FUNDS	154,526	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00
TOTAL	\$6,421,373	0.00	\$6,463,900	0.00	\$6,463,900	0.00	\$6,411,388	0.00	\$5,964,884	0.00	\$5,964,884	0.00	\$5,964,884	0.00

MHD Cost to Continue - 1886008

PROGRAM-SPECIFIC	0	0.00	0	0.00	401,892	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	155,671	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	246,221	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$401,892	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections. Senate rec for Pharmacy section includes a fund switch of \$10 million of GR to Surplus Revenue Fund and \$2.5 million of GR to Pharmacy Rebates Fund. TAFP rec same as Senate.

FMAP Adjustment - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	79,506	0.00	79,506	0.00	79,506	0.00	79,506	0.00
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Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475														
HOME HEALTH - 90564C														
FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	79,506	0.00	79,506	0.00	79,506	0.00	79,506	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	79,506	0.00	79,506	0.00	79,506	0.00	79,506	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$79,506	0.00	\$79,506	0.00	\$79,506	0.00	\$79,506	0.00
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.														

Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(697,054)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(180,644)	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	(516,410)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$697,054)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														

Long Term Care Rate Increase - 1886020														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	102,764	0.00	1,620,174	0.00	102,764	0.00	1,620,174	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	37,925	0.00	597,925	0.00	37,925	0.00	597,925	0.00

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475														
HOME HEALTH - 90564C														
Long Term Care Rate Increase - 1886020														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	102,764	0.00	1,620,174	0.00	102,764	0.00	1,620,174	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	64,839	0.00	1,022,249	0.00	64,839	0.00	1,022,249	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$102,764	0.00	\$1,620,174	0.00	\$102,764	0.00	\$1,620,174	0.00
GOVERNOR REC: Funding for a rate increase to long term care providers. Includes a \$2.50 per diem rate increase for nursing facilities with an additional \$1.25 trend factor increase from NFFRA (\$3.75 Total), and a 2% rate increase for hospice and home health providers. HOUSE COMM SUB REC: Same as Gov Rec with an additional rate increase for home health of \$1,517,410 (\$560,000 GR and \$957,410 FED).														

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Adult Therapies Benefits - 1886035														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	2,126,558	0.00	0	0.00	2,126,558	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	784,806	0.00	0	0.00	784,806	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,341,752	0.00	0	0.00	1,341,752	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,126,558	0.00	\$0	0.00	\$2,126,558	0.00
Provides occupational, speech and physical therapy benefits to all Medicaid eligible adults.														

TOTAL - HOME HEALTH	\$6,421,373	0.00	\$6,463,900	0.00	\$6,865,792	0.00	\$5,896,604	0.00	\$9,791,122	0.00	\$6,147,154	0.00	\$9,791,122	0.00
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DEPARTMENT OF SOCIAL SERVICES

HB 11.475 continued MO HealthNet Division – Program for All-Inclusive Care for the Elderly (PACE)

Book 5, page 296

This section provides funding for PACE, which is designed to help a MO HealthNet recipient remain in their home instead of seeking institutional care. In the FY 10 budget, PACE funding is being reallocated from the Home Health section to a new section.

Legal Base: RSMo 208.152 and 208.168; Federal – Social Security Act Section Number: 1905(a) (7), (24), 1915(c), 42 CFR 440.170(f), 440.210, 440.130 and 440.180
Fund Sources: General Revenue and Federal
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$11,415) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$11,415 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$82,161) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

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FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475														
PACE - 90568C														
CORE														
PROGRAM-SPECIFIC	6,653,329	0.00	6,675,723	0.00	6,675,723	0.00	6,664,308	0.00	6,593,562	0.00	6,593,562	0.00	6,593,562	0.00
GENERAL REVENUE	2,544,136	0.00	2,545,837	0.00	2,545,837	0.00	2,534,422	0.00	2,463,676	0.00	2,463,676	0.00	2,463,676	0.00
FEDERAL FUNDS	4,109,193	0.00	4,129,886	0.00	4,129,886	0.00	4,129,886	0.00	4,129,886	0.00	4,129,886	0.00	4,129,886	0.00
TOTAL	\$6,653,329	0.00	\$6,675,723	0.00	\$6,675,723	0.00	\$6,664,308	0.00	\$6,593,562	0.00	\$6,593,562	0.00	\$6,593,562	0.00

MHD Cost to Continue - 1886008														
PROGRAM-SPECIFIC	0	0.00	0	0.00	499,076	0.00	308,826	0.00	272,458	0.00	272,458	0.00	272,458	0.00
GENERAL REVENUE	0	0.00	0	0.00	190,250	0.00	0	0.00	68,258	0.00	68,258	0.00	68,258	0.00
FEDERAL FUNDS	0	0.00	0	0.00	308,826	0.00	308,826	0.00	204,200	0.00	204,200	0.00	204,200	0.00
TOTAL	\$0	0.00	\$0	0.00	\$499,076	0.00	\$308,826	0.00	\$272,458	0.00	\$272,458	0.00	\$272,458	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections. Senate rec for Pharmacy section includes a fund switch of \$10 million of GR to Surplus Revenue Fund and \$2.5 million of GR to Pharmacy Rebates Fund. TAFP rec same as Senate.

FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	82,161	0.00	82,161	0.00	82,161	0.00	82,161	0.00

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES										Regular House Bills			
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475														
PACE - 90568C														
FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC														
FEDERAL FUNDS														
TOTAL														
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.														
TOTAL - PACE														

DEPARTMENT OF SOCIAL SERVICES

HB 11.480 **MO HealthNet Division – Long-Term Care Upper Payment Limit (UPL) transfer to GR**

Book 5, page 305

This section establishes a partnership between privately owned long-term care facilities and publicly operated long-term care related services, such as county nursing homes, which allows Missouri to generate new federal revenue by having private nursing homes assume financial responsibility for publicly funded long-term care services and supports. This shift in financial responsibility frees up public funding that can be used to access additional federal matching funds. The new dollars can be used to offset general revenue, increase reimbursement to providers of long-term care and supports, as well as assist local governments to develop and maintain its long-term service delivery system.

Legal Base: Federal - 42 CFR 447.272
Fund Sources: Federal and Other
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

No changes

CONFERENCE:

No changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES										Regular House Bills			
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480														
LONG TERM SUPPORT UPL TRANSFER - 90545C														
CORE														
FUND TRANSFERS	0	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00
OTHER FUNDS	0	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00
TOTAL	\$0	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00
TOTAL - LONG TERM SUPPORT UPL TRANSF	\$0	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00

DEPARTMENT OF SOCIAL SERVICES

HB 11.485

MO HealthNet Division – Long-Term Care Upper Payment Limit (UPL)

Book 5, page 311

This section establishes a partnership between privately owned long-term care facilities and publicly operated long-term care related services, such as county nursing homes, which allows Missouri to generate new federal revenue by having private nursing homes assume financial responsibility for publicly funded long-term care services and supports. This shift in financial responsibility frees up public funding that can be used to access additional federal matching funds. The new dollars can be used to offset general revenue, increase reimbursement to providers of long-term care and supports, as well as assist local governments to develop and maintain its long-term service delivery system.

Legal Base: Federal - 42 CFR 447.272
Fund Sources: Federal and Other
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

No changes

CONFERENCE:

No changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES										Regular House Bills			
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.485														
LONG TERM SUPPORT PAYMENTS - 90548C														
CORE														
PROGRAM-SPECIFIC	0	0.00	45,895,112	0.00	45,895,112	0.00	45,895,112	0.00	45,895,112	0.00	45,895,112	0.00	45,895,112	0.00
FEDERAL FUNDS	0	0.00	28,393,011	0.00	28,393,011	0.00	28,393,011	0.00	28,393,011	0.00	28,393,011	0.00	28,393,011	0.00
OTHER FUNDS	0	0.00	17,502,101	0.00	17,502,101	0.00	17,502,101	0.00	17,502,101	0.00	17,502,101	0.00	17,502,101	0.00
TOTAL	\$0	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00
TOTAL - LONG TERM SUPPORT PAYMENTS	\$0	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.490 MO HealthNet Division – Rehabilitation and Specialty Services

Book 5, page 317

This section provides funding for the reimbursement of all other allowable, non-institutional services as provided by title XIX of the Social Security Act. These services include rehabilitation, optometry, audiology, ambulance, durable medical equipment, hospice, comprehensive day rehabilitation, and diabetics' self-management training.

Legal Base: RSMo 208.152; Federal – Social Security Act Section Number: 1905(a) (15), (18), 1905(o), 42 CFR 410.40, 418, 431.53, 440.60, 440.120, 440.130 and 440.170
Funding Sources: General Revenue, Federal, Health Initiatives (HIF), and Healthy Families Trust Fund – Health Care Account (HFTF)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$7,137,953) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$7,137,953 GR PSD reallocated back in – reversed the Governor's core reallocation
Core Reallocation Out: (\$12,707,330) PSD (GR \$4,689,640 & FED \$8,017,690) reallocated out to new section for Complex Rehabilitation Technology Products
Core Reduction: (\$7,210,737) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

Core Reallocation In: \$12,707,330 PSD (GR \$4,689,640 & FED \$8,017,690) reversed House action to create new section for Complex Rehabilitation Technology Products
Core Reduction: (\$17,440) GR EE core reduction – 2% Professional Services reduction

CONFERENCE:

Core Reallocation Out: (\$12,707,330) PSD (GR \$4,689,640 & FED \$8,017,690) reallocated out to new section for Complex Rehabilitation Technology Products
Core Restoration: \$17,440 GR EE core restoration

VETOES:

NDI veto: \$1,600,000 (\$590,480 GR & \$1,009,520 FED) – NDI for 2% provider rate increase
NDI veto: \$1,884,190 (\$695,360 GR & \$1,188,830 FED) – NDI for rate increase for Helicopter Emergency Medical Services (HEMS)

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490														
REHAB AND SPECIALTY SERVICES - 90550C														
CORE														
EXPENSE & EQUIPMENT	456,157	0.00	1,716,000	0.00	1,716,000	0.00	1,716,000	0.00	1,716,000	0.00	1,698,560	0.00	1,716,000	0.00
GENERAL REVENUE	425,564	0.00	872,000	0.00	872,000	0.00	872,000	0.00	872,000	0.00	854,560	0.00	872,000	0.00
FEDERAL FUNDS	30,593	0.00	844,000	0.00	844,000	0.00	844,000	0.00	844,000	0.00	844,000	0.00	844,000	0.00
PROGRAM-SPECIFIC	254,624,446	0.00	268,499,381	0.00	268,499,381	0.00	261,361,428	0.00	248,581,314	0.00	261,288,644	0.00	248,581,314	0.00
GENERAL REVENUE	85,400,526	0.00	85,819,317	0.00	85,819,317	0.00	78,681,364	0.00	73,918,940	0.00	78,608,580	0.00	73,918,940	0.00
FEDERAL FUNDS	149,827,017	0.00	162,221,014	0.00	162,221,014	0.00	162,221,014	0.00	154,203,324	0.00	162,221,014	0.00	154,203,324	0.00
OTHER FUNDS	19,396,903	0.00	20,459,050	0.00	20,459,050	0.00	20,459,050	0.00	20,459,050	0.00	20,459,050	0.00	20,459,050	0.00
TOTAL	\$255,080,603	0.00	\$270,215,381	0.00	\$270,215,381	0.00	\$263,077,428	0.00	\$250,297,314	0.00	\$262,987,204	0.00	\$250,297,314	0.00

MHD Cost to Continue - 1886008

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	279,768	0.00	279,768	0.00	279,768	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	279,768	0.00	279,768	0.00	279,768	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$279,768	0.00	\$279,768	0.00	\$279,768	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections. Senate rec for Pharmacy section includes a fund switch of \$10 million of GR to Surplus Revenue Fund and \$2.5 million of GR to Pharmacy Rebates Fund. TAFP rec same as Senate.

Hospice Rate Increase - 1886011

PROGRAM-SPECIFIC	0	0.00	0	0.00	343,078	0.00	343,078	0.00	343,078	0.00	343,078	0.00	343,078	0.00
GENERAL REVENUE	0	0.00	0	0.00	130,267	0.00	126,613	0.00	126,613	0.00	126,613	0.00	126,613	0.00

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490														
REHAB AND SPECIALTY SERVICES - 90550C														
Hospice Rate Increase - 1886011														
PROGRAM-SPECIFIC	0	0.00	0	0.00	343,078	0.00	343,078	0.00	343,078	0.00	343,078	0.00	343,078	0.00
FEDERAL FUNDS	0	0.00	0	0.00	212,811	0.00	216,465	0.00	216,465	0.00	216,465	0.00	216,465	0.00
TOTAL	\$0	0.00	\$0	0.00	\$343,078	0.00	\$343,078	0.00	\$343,078	0.00	\$343,078	0.00	\$343,078	0.00
The MO HealthNet hospice rates are calculated based on the annual hospice rates established under Medicare. The Act provides for an annual increase in payment rates for hospice care services. The request is for a 1.95% increase. The Governor's recommendation is based on better FMAP rate information.														

FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	7,210,737	0.00	7,210,737	0.00	7,210,737	0.00	7,210,737	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	7,210,737	0.00	7,210,737	0.00	7,210,737	0.00	7,210,737	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$7,210,737	0.00	\$7,210,737	0.00	\$7,210,737	0.00	\$7,210,737	0.00
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.														

Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(1,636,520)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(1,485,382)	0.00	0	0.00	0	0.00	0	0.00

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490														
REHAB AND SPECIALTY SERVICES - 90550C														
Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(1,636,520)	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	(151,138)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$1,636,520)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														

Long Term Care Rate Increase - 1886020														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,600,000	0.00	1,600,000	0.00	1,600,000	0.00	1,600,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	590,480	0.00	590,480	0.00	590,480	0.00	590,480	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,009,520	0.00	1,009,520	0.00	1,009,520	0.00	1,009,520	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,600,000	0.00	\$1,600,000	0.00	\$1,600,000	0.00	\$1,600,000	0.00
GOVERNOR REC: Funding for a rate increase to long term care providers. Includes a \$2.50 per diem rate increase for nursing facilities with an additional \$1.25 trend factor increase from NFFRA (\$3.75 Total), and a 2% rate increase for hospice and home health providers. HOUSE COMM SUB REC: Same as Gov Rec with an additional rate increase for home health of \$1,517,410 (\$560,000 GR and \$957,410 FED).														

Adult Therapies Benefits - 1886035														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	17,653,960	0.00	0	0.00	17,653,960	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	6,515,194	0.00	0	0.00	6,515,194	0.00

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490														
REHAB AND SPECIALTY SERVICES - 90550C														
Adult Therapies Benefits - 1886035														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	17,653,960	0.00	0	0.00	17,653,960	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	11,138,766	0.00	0	0.00	11,138,766	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$17,653,960	0.00	\$0	0.00	\$17,653,960	0.00
Provides occupational, speech and physical therapy benefits to all Medicaid eligible adults.														

Helicopter Emergency Medical - 1886038														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,884,190	0.00	1,884,190	0.00	1,884,190	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	695,360	0.00	695,360	0.00	695,360	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,188,830	0.00	1,188,830	0.00	1,188,830	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,884,190	0.00	\$1,884,190	0.00	\$1,884,190	0.00
Provides funds to increase the Medicaid reimbursement base rate for Helicopter Emergency Medical Services (HEMS). This item provides approximately 20% of the funding gap between Medicaid and Medicare rates. This does not increase per patient transport mileage.														

Ambulance Districts Rate Inc - 1886044														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	8,375,114	0.00	8,375,114	0.00	8,375,114	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	4,870,748	0.00	4,870,748	0.00	4,870,748	0.00

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES														Regular House Bills	
FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED			
DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490															
REHAB AND SPECIALTY SERVICES - 90550C															
Ambulance Districts Rate Inc - 1886044															
PROGRAM-SPECIFIC		0	0.00	0	0.00	0	0.00	0	0.00	8,375,114	0.00	8,375,114	0.00	8,375,114	0.00
OTHER FUNDS		0	0.00	0	0.00	0	0.00	0	0.00	3,504,366	0.00	3,504,366	0.00	3,504,366	0.00
TOTAL		\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$8,375,114	0.00	\$8,375,114	0.00	\$8,375,114	0.00
Provides the authority to implement a \$45 base rate increase for Ambulance Districts (A0427 and A0429).															

TOTAL - REHAB AND SPECIALTY SERVICES	\$255,080,603	0.00	\$270,215,381	0.00	\$270,558,459	0.00	\$270,594,723	0.00	\$287,644,161	0.00	\$282,680,091	0.00	\$287,644,161	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.490 continued MO HealthNet Division – Non-Emergency Medical Transportation (NEMT)

Book 5, page 335

This section provides funding for Non-Emergency Medical Transportation (NEMT).

Legal Base: RSMo 208.152; Federal – 42 CFR 431.53
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$530,737) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$530,737 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$530,737) GR PSD core reduction due to estimated lapse
 (\$425,706) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES										Regular House Bills			
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490														
NON-EMERGENCY TRANSPORT - 90561C														
CORE														
PROGRAM-SPECIFIC	34,074,576	0.00	41,455,931	0.00	41,455,931	0.00	40,925,194	0.00	40,499,488	0.00	40,499,488	0.00	40,499,488	0.00
GENERAL REVENUE	11,579,111	0.00	13,340,917	0.00	13,340,917	0.00	12,810,180	0.00	12,384,474	0.00	12,384,474	0.00	12,384,474	0.00
FEDERAL FUNDS	22,495,465	0.00	28,115,014	0.00	28,115,014	0.00	28,115,014	0.00	28,115,014	0.00	28,115,014	0.00	28,115,014	0.00
TOTAL	\$34,074,576	0.00	\$41,455,931	0.00	\$41,455,931	0.00	\$40,925,194	0.00	\$40,499,488	0.00	\$40,499,488	0.00	\$40,499,488	0.00

FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	425,706	0.00	425,706	0.00	425,706	0.00	425,706	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	425,706	0.00	425,706	0.00	425,706	0.00	425,706	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$425,706	0.00	\$425,706	0.00	\$425,706	0.00	\$425,706	0.00

This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490														
NON-EMERGENCY TRANSPORT - 90561C														
Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(172,516)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(172,516)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$172,516)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														
TOTAL - NON-EMERGENCY TRANSPORT	\$34,074,576	0.00	\$41,455,931	0.00	\$41,455,931	0.00	\$41,178,384	0.00	\$40,925,194	0.00	\$40,925,194	0.00	\$40,925,194	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.490 continued MO HealthNet Division – Community Health Access Programs

Book N/A

New section created by the House that provides state matching funds (50/50 State/Local Match) for Community Health Access Programs (CHAPs) focused on meeting the health care needs of their communities and reducing the costs incurred by health care providers when patients inappropriately access health care resources through Emergency Medical Services (EMS) or Emergency Departments (ED). This program will be managed by providers that either operate their own EMS or partner with a local ambulance district(s). Target population is ages 17-64 that, after receiving a full medical screening exam, are deemed to have a non-emergency medical condition that can be more appropriately treated by a primary care provider in a health care home or community resource center. Funding is for Springfield/Green County for \$500,000 and communities surrounding Christian Hospital in St. Louis for \$500,000.

Legal Base:

Funding Sources: General Revenue

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

New section recommended by the House

SENATE:

Senate added \$250,000 to new section created by the House

CONFERENCE:

Same as Senate – no additional changes

VETOES:

NDI veto: \$1,250,000 GR – NDI for 3 Community Health Access Programs (CHAPs) – St. Louis, Springfield/Greene County, & Crawford County

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE

HOUSE BILL SECTION 11.490

COMMUNITY HEALTH ACCESS PRGRMS - 90579C

Comm Health Access Prg (CHAPS) - 1886046														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00	1,250,000	0.00	1,250,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00	1,250,000	0.00	1,250,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,000,000	0.00	\$1,250,000	0.00	\$1,250,000	0.00

Provides state matching funds (50/50 State/Local Match) for Community Health Access Programs (CHAPs) focused on meeting the health care needs of their communities and reducing the costs incurred by health care providers when patients inappropriately access health care resources through Emergency Medical Services (EMS) or Emergency Departments (EDs). This program will be managed by providers that either operate their own EMS or partner with a local ambulance district(s). Target population is ages 17-64 who, after receiving a full medical screening exam, are deemed to have a non-emergent medical condition that can be more appropriately treated by a primary care provider in a health care home or community resource center. Funding is for Springfield/Green County (\$500,000) and communities surrounding Christian Hospital in St. Louis (\$500,000). SENATE: Added \$250,000 for Crawford County.

Verfied →

TOTAL - COMMUNITY HEALTH ACCESS PRGI	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,000,000	0.00	\$1,250,000	0.00	\$1,250,000	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.492 MO HealthNet Division – Complex Rehabilitation Technology Products

Book N/A

New section created by the House that provides funding for complex rehabilitation technology (CRT) items classified within the Medicare program as of January 1, 2014 as durable medical equipment that are individually configured for individuals to meet their specific and unique medical, physical, and functional needs and capacities for basic activities of daily living and instrumental activities of daily living identified as medically necessary to prevent hospitalization and/or institutionalization of a complex needs patient. Such items shall include, but not be limited to, complex rehabilitation power wheelchairs, highly configurable manual wheelchairs, adaptive seating and positioning systems, and other specialized equipment such as standing frames and gait trainers. The related Healthcare Common Procedure Coding System (HCPCS) billing codes include, but are not limited to pure complex rehabilitation technology codes and mixed complex rehabilitation technology codes which contain a mix of complex rehabilitation technology products and standard mobility and accessory products.

This section provides funding for HCPCS codes defined by the National Coalition for Assistive and Rehab Technology (NCART) as CRT to MO HealthNet allowables as of 04/01/2010. HCPCS codes adopted after 04/01/2010 shall be reimbursed at the current Medicare allowable. Manually priced items shall be reimbursed at ninety percent (90%) of the Manufacturer's Suggested Retail Price (MSRP) for manual priced manual and custom wheelchairs and accessories and ninety five (95%) of MSRP on manually priced power mobility devices and accessories

Legal Base: RSMo 208.152; Federal – Social Security Act Section Number: 1905(a) (15), (18), 1905(o), 42 CFR 410.40, 418, 431.53, 440.60, 440.120, 440.130 and 440.170
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

Core Reallocation In: \$12,707,330 PSD (GR \$4,689,640 & FED \$8,017,690) reallocated in from Rehabilitation and Specialty Services

SENATE:

Core Reallocation Out: (\$12,707,330) PSD (GR \$4,689,640 & FED \$8,017,690) reversed House action to create new section for Complex Rehabilitation Technology Products

CONFERENCE:

Core Reallocation In: \$12,707,330 PSD (GR \$4,689,640 & FED \$8,017,690) reallocated in from Rehabilitation and Specialty Services

VETOES:

NDI veto: \$1,433,057 (\$528,870 GR & \$904,187) – NDI for provider rate increase

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.492														
COMPLEX REHAB TECHN LGY PRDCTS - 90577C														
CORE														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	12,707,330	0.00	0	0.00	12,707,330	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	4,689,640	0.00	0	0.00	4,689,640	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	8,017,690	0.00	0	0.00	8,017,690	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$12,707,330	0.00	\$0	0.00	\$12,707,330	0.00

Complex Rehabilitation Tech - 1886039

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,433,057	0.00	0	0.00	1,433,057	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	528,870	0.00	0	0.00	528,870	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	904,187	0.00	0	0.00	904,187	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,433,057	0.00	\$0	0.00	\$1,433,057	0.00

Provides separate funding for complex rehabilitation technology (CRT). The related Healthcare Common Procedure Coding System (HCPCS) billing codes include, but are not limited to: E0637, E0638, E0641, E0642, E0986, E1002, E1003, E1004, E1005, E1006, E1007, E1008, E1009, E1010, E1011, E1014, E1037, E1161, E1220, E1228, E1229, E1231, E1232, E1233, E1234, E1235, E1236, E1237, E1238, E1239, E2209, E2291, E2292, E2293, E2294, E2295, E2300, E2301, E2310, E2311, E2312, E2313, E2321, E2322, E2323, E2324, E2325, E2326, E2327, E2328, E2329, E2330, E2331, E2351, E2373, E2374, E2376, E2377, E2609, E2610, E2617, E8000, E8001, E8002, K0005, K0835, K0836, K0837, K0838, K0839, K0840, K0841, K0842, K0843, K0848, K0849, K0850, K0851, K0852, K0853, K0854, K0855, K0856, K0857, K0858, K0859, K0860, K0861, K0862, K0863, K0864, K0868, K0869, K0870, K0871, K0877, K0878, K0879, K0880, K0884, K0885, K0886, K0890, K0891, K0898, E0950, E0951, E0952, E0955, E0956, E0957, E0958, E0960, E0967, E0978, E0990, E1015, E1016, E1028, E1029, E1030, E2205, E2208, E2231, E2368, E2369, E2370, E2605, E2606, E2607, E2608, E2613, E2614, E2615, E2616, E2620, E2621, E2624, E2625, K0004, K0009, K0040, K0108, and K0669.

TOTAL - COMPLEX REHAB TECHN LGY PRDU	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$14,140,387	0.00	\$0	0.00	\$14,140,387	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.495 & 11.500 MO HealthNet Division – Ground Ambulance Provider Tax Transfers

Book 5, Pages 343 & 349

These two sections provide the mechanism to transfer funding between General Revenue and the Ambulance Service Reimbursement Allowance Fund for Ambulance Services in the MO HealthNet program.

Legal Basis: RSMo. 190.800-190.839
Funding Sources: General Revenue and Ambulance Service Reimbursement Allowance Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
Requested an “E”

GOVERNOR:
Recommended an “E”

HOUSE:
House removed the “E”

SENATE:
Same as House – no additional changes

CONFERENCE:
Same as House – no additional changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.495														
AMBULANCE SRV REIM ALLOW TRF - 90581C														
CORE														
FUND TRANSFERS	6,535,001	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00
GENERAL REVENUE	6,535,001	0.00	18,236,543	0.00	18,236,543 E	0.00	18,236,543 E	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00
TOTAL	\$6,535,001	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00
TOTAL - AMBULANCE SRV REIM ALLOW TRF	\$6,535,001	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.500														
GR AMBULANCE SRV REIM ALL TRF - 90583C														
CORE														
FUND TRANSFERS	6,535,001	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00
OTHER FUNDS	6,535,001	0.00	18,236,543	0.00	18,236,543 E	0.00	18,236,543 E	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00
TOTAL	\$6,535,001	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00
TOTAL - GR AMBULANCE SRV REIM ALL TRF	\$6,535,001	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.505 **MO HealthNet Division – Managed Care**

Book 5, page 355

The Division of Medical Services (DMS) operates an HMO-style managed care program, Managed Care Plus (MC+). Health plans contract with the state and are paid a monthly capitation payment for providing services for each enrollee. Participation in MC+ is mandatory for certain Medicaid eligibility groups within the regions in operation. There are three eligibility groups: (1) TANF Adults and Children, Refugees, Medicaid for Children, and 1115 Waiver Children; (2) Medicaid for Pregnant Women and 1115 Waiver Adults; and (3) children in state care and custody. Those recipients who also receive SSI disability payments have the option of choosing to receive services on a fee-for-service basis.

Legal Base: RSMo 208.166; Federal – Social Security Act Section Number: 1915(b), 42 CFR 434 Subpart C
Funding Sources: General Revenue, Federal, Health Initiatives (HIF), Federal Reimbursement Allowance (FRA), Healthy Families Trust Fund – Health Care Account (HFTF), and Medicaid managed Care Organization Reimbursement Allowance Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

Core Reduction: (\$11,889,461) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$10,050,869) GR PSD core reduction due to estimated lapse
(\$5,220,516) PSD (GR \$1,295,564; FED \$3,691,620; & OTH \$233,332) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI
(\$1,000,000) GR PSD core reduction – funding was redirected to new program for CHAPS

SENATE:

Core Reduction: (\$27,286,484) PSD (GR \$10,070,077 & FED \$17,216,407) core reduction due to estimated lapse

CONFERENCE:

Same as Senate – no additional changes

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505														
MANAGED CARE - 90551C														
CORE														
EXPENSE & EQUIPMENT	1,608,701	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	1,605,201	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	3,500	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	1,097,874,612	0.00	1,182,760,062	0.00	1,182,760,062	0.00	1,182,760,062	0.00	1,154,599,216	0.00	1,127,312,732	0.00	1,127,312,732	0.00
GENERAL REVENUE	290,031,968	0.00	321,095,339	0.00	321,095,339	0.00	321,095,339	0.00	296,859,445	0.00	286,789,368	0.00	286,789,368	0.00
FEDERAL FUNDS	679,298,296	0.00	745,188,433	0.00	745,188,433	0.00	745,188,433	0.00	741,496,813	0.00	724,280,406	0.00	724,280,406	0.00
OTHER FUNDS	128,544,348	0.00	116,476,290	0.00	116,476,290	0.00	116,476,290	0.00	116,242,958	0.00	116,242,958	0.00	116,242,958	0.00
TOTAL	\$1,099,483,313	0.00	\$1,182,760,062	0.00	\$1,182,760,062	0.00	\$1,182,760,062	0.00	\$1,154,599,216	0.00	\$1,127,312,732	0.00	\$1,127,312,732	0.00

Managed Care Acturial Increase - 1886009

PROGRAM-SPECIFIC	0	0.00	0	0.00	55,258,971	0.00	34,432,838	0.00	54,573,006	0.00	54,573,006	0.00	54,573,006	0.00
GENERAL REVENUE	0	0.00	0	0.00	20,981,831	0.00	0	0.00	20,140,168	0.00	20,140,168	0.00	20,140,168	0.00
FEDERAL FUNDS	0	0.00	0	0.00	34,277,140	0.00	34,432,838	0.00	34,432,838	0.00	34,432,838	0.00	34,432,838	0.00
TOTAL	\$0	0.00	\$0	0.00	\$55,258,971	0.00	\$34,432,838	0.00	\$54,573,006	0.00	\$54,573,006	0.00	\$54,573,006	0.00

Funding is needed to fund an increase for Managed Care medical, delivery and Neonatal Intensive Care Unit services to ensure that managed care payments are actuarially sound. Funding is for the Eastern, Central and Western regions for July 2014 through June 2015. MO HealthNet needs to maintain capitation rates at a sufficient level to ensure continued health plan and provider participation. Federal rules and regulations require that capitation payments made on behalf of managed care participants be actuarially sound. Further, the state must provide the actuarial certification of the capitation rates to the CMS. The CMS Regional Office must review and approve all contracts for managed care as a condition for federal financial participation.

FMAP Adjustment - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	11,889,461	0.00	11,889,461	0.00	11,889,461	0.00	11,889,461	0.00
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Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505														
MANAGED CARE - 90551C														
FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	11,889,461	0.00	11,889,461	0.00	11,889,461	0.00	11,889,461	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	11,889,461	0.00	11,889,461	0.00	11,889,461	0.00	11,889,461	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$11,889,461	0.00	\$11,889,461	0.00	\$11,889,461	0.00	\$11,889,461	0.00
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.														

Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(28,972,237)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(13,878,160)	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	(7,017,542)	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	(8,076,535)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$28,972,237)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														

Ambulance Districts Rate Inc - 1886044														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,109,430	0.00	1,109,430	0.00	1,109,430	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	699,995	0.00	699,995	0.00	699,995	0.00

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FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505														
MANAGED CARE - 90551C														
Ambulance Districts Rate Inc - 1886044														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,109,430	0.00	1,109,430	0.00	1,109,430	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	409,435	0.00	409,435	0.00	409,435	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,109,430	0.00	\$1,109,430	0.00	\$1,109,430	0.00
Provides the authority to implement a \$45 base rate increase for Ambulance Districts (A0427 and A0429).														

TOTAL - MANAGED CARE	\$1,099,483,313	0.00	\$1,182,760,062	0.00	\$1,238,019,033	0.00	\$1,200,110,124	0.00	\$1,222,171,113	0.00	\$1,194,884,629	0.00	\$1,194,884,629	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.510 MO HealthNet Division – Title XIX Payments - Hospital Services

Book 5, page 368

This section provides funding for inpatient and outpatient hospital services provided to eligible Missouri Medicaid recipients.

Legal Base: RSMo 208.152, 208.153, 208.453; Federal – Social Security Act Section Number: 1903(w), 1905(a) (1), (2), 1923(a-f), 42 CFR 440.10, 440.20, 412.106, and 433 Subpart B.

Funding Sources: General Revenue, Federal, Uncompensated Care (UC), Federal Reimbursement Allowance (FRA), Health Initiatives (HIF), Healthy Families Trust Fund – Health Care Account (HFTF), and Third Party Liability Collections Fund

FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reduction: (\$10,011,950) OTHER PSD core reduction for one-time use of fund balance in FY 2014 budget

Core Reallocation Out: (\$10,210,491) GR PSD reallocated out to Pharmacy - \$6,529,428 and Blind Pension Medical - \$3,681,063

HOUSE:

Core Reallocation In: \$10,210,491 GR PSD reallocated back in – reversed the Governor’s core reallocation

Core Transfer In: \$353,092 GR PSD transferred in from Dept. of Corrections for healthcare for Medicaid eligible inmates

Core Reduction: (\$8,564,606) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

(\$1,645,885) GR PSD core reduction due to estimated lapse

(\$2,814,303) PSD (GR \$629,915; FED \$1,764,445; & \$419,943) core reduction due to estimated savings from DMH ADA Health Home Savings

(\$2,535,428) PSD (GR \$456,216; FED \$1,299,956; & OTH \$779,256) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI

(\$1,447,166) PSD (GR \$534,077 & FED \$913,089) core reduction due to estimated savings related to Adult Dental Coverage addition

SENATE:

Core Reduction: (\$3,164,098) PSD (GR \$1,139,550 & FED \$2,024,548) core reduction due to additional estimated savings related to Adult Dental Coverage addition

(\$2,360,055) PSD (GR \$849,973 & FED \$1,510,082) core reduction due to estimated saving from DMH CPS Health Home Savings

(\$3,000) GR EE core reduction – 2% Professional services reduction

CONFERENCE:

Core Restoration: \$3,000 GR EE core restoration

VETOES:

NDI veto: \$200,000 (\$100,000 GR & \$100,000 FED) – NDI for a targeted program to manage the diabetic population in Southwest MO

Core veto: \$400,000 (\$200,000 GR & \$200,000 FED) – core funding for a community-based coordinating program (In-Home Telemonitoring)

Core veto: \$300,000 (\$150,000 GR & \$150,000 FED) – core funding for pager project facilitating medication compliance

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510														
HOSPITAL CARE - 90552C														
CORE														
EXPENSE & EQUIPMENT	3,530,964	0.00	730,000	0.00	730,000	0.00	730,000	0.00	730,000	0.00	727,000	0.00	730,000	0.00
GENERAL REVENUE	0	0.00	150,000	0.00	150,000	0.00	150,000	0.00	150,000	0.00	147,000	0.00	150,000 0	0.00
FEDERAL FUNDS	2,526,749	0.00	365,000	0.00	365,000	0.00	365,000	0.00	365,000	0.00	365,000	0.00	365,000 215,000	0.00
OTHER FUNDS	1,004,215	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00
PROGRAM-SPECIFIC	778,846,584	0.00	813,040,245	0.00	813,040,245	0.00	792,817,804	0.00	786,373,999	0.00	780,849,846	0.00	780,849,846	0.00
GENERAL REVENUE	20,943,641	0.00	30,330,998	0.00	30,330,998	0.00	20,120,507	0.00	18,853,391	0.00	16,863,868	0.00	16,863,868 16,663,868	0.00
FEDERAL FUNDS	483,237,025	0.00	510,523,697	0.00	510,523,697	0.00	510,523,697	0.00	506,546,207	0.00	503,011,577	0.00	503,011,577 502,811,577	0.00
OTHER FUNDS	274,665,918	0.00	272,185,550	0.00	272,185,550	0.00	262,173,600	0.00	260,974,401	0.00	260,974,401	0.00	260,974,401	0.00
TOTAL	\$782,377,548	0.00	\$813,770,245	0.00	\$813,770,245	0.00	\$793,547,804	0.00	\$787,103,999	0.00	\$781,576,846	0.00	\$781,579,846	0.00

MHD GR Pickup - 1886002

PROGRAM-SPECIFIC	0	0.00	0	0.00	10,011,950	0.00	10,011,950	0.00	10,011,950	0.00	10,011,950	0.00	10,011,950	0.00
GENERAL REVENUE	0	0.00	0	0.00	10,011,950	0.00	10,011,950	0.00	10,011,950	0.00	7,511,950	0.00	7,511,950	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	2,500,000	0.00	2,500,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$10,011,950	0.00	\$10,011,950	0.00	\$10,011,950	0.00	\$10,011,950	0.00	\$10,011,950	0.00

General Revenue funding is requested to replace Pharmacy Rebates funding (\$14,950,905). Revenues are projected to be less than appropriated amounts in FY 2014. In addition, the FY 2014 budget included the Missouri Senior Services Protection Fund in Blind Medical (\$21,489,941) (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) and Federally Qualified Health Center (\$3,270,000) programs as one-time. GR is requested to replace this one-time funding. General Revenue is requested to replace Blind Pension Premium Fund (\$3,632,576) budgeted in Blind Pension Medical -- (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) Also, GR is requested to replace one-time Premium Fund cash balance in Hospital program (\$10,011,950). Senate rec includes a fund switch of \$2.5 million of GR to Premium Fund in Hospital section

FMAP Adjustment - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	8,564,606	0.00	8,564,606	0.00	8,564,606	0.00	8,564,606	0.00
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Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510														
HOSPITAL CARE - 90552C														
FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	8,564,606	0.00	8,564,606	0.00	8,564,606	0.00	8,564,606	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	8,564,606	0.00	8,564,606	0.00	8,564,606	0.00	8,564,606	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$8,564,606	0.00	\$8,564,606	0.00	\$8,564,606	0.00	\$8,564,606	0.00
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.														

Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(33,602,417)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(11,154,546)	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	(4,235,582)	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	(18,212,289)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$33,602,417)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														

Medicaid for DOC Inmates - 1886040														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	603,667	0.00	603,667	0.00	603,667	0.00

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510														
HOSPITAL CARE - 90552C														
Medicaid for DOC Inmates - 1886040														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	603,667	0.00	603,667	0.00	603,667	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	603,667	0.00	603,667	0.00	603,667	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$603,667	0.00	\$603,667	0.00	\$603,667	0.00

Department of Corrections inmates who leave state or local facilities for at least 24 hours to receive treatment in local hospitals or nursing facilities could be covered by Medicaid if otherwise eligible. In addition to those incarcerated, those on probation or parole or under house arrest could participate. This item provides federal Medicaid match authority for this purpose. The General Revenue (\$353,092) is being transferred to DSS from DOC in the core budget for the state match portion.

In-Home Telemonitoring - 1886047														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	100,000	0.00	200,000	0.00	200,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	100,000	0.00	100,000	0.00	100,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	100,000	0.00	100,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$100,000	0.00	\$200,000	0.00	\$200,000	0.00

0
Vetoed

TOTAL - HOSPITAL CARE	\$782,377,548	0.00	\$813,770,245	0.00	\$823,782,195	0.00	\$778,521,943	0.00	\$806,384,222	0.00	\$800,957,069	0.00	\$800,960,069	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.515 **MO HealthNet Divisions – Tier 1 Safety Net Hospitals**

Book 5, page 382

This section provides ongoing funding to reimburse for health care services provided to Medicaid clients and the uninsured through Tier 1 Safety Net Hospitals. Enhanced payments are made to Truman Medical Center Physicians and UM-Kansas City Physicians.

Legal Base: 208.152, 208.153, RSMo; Social Security Act Sections 1905(a) (1) and (2), 1923(a)-(f); Federal Regulations 42 CFR 440.10 and 440.20

Funding Sources: Federal

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

No changes

CONFERENCE:

No changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.515														
PHYSICIAN PAYMENTS SAFETY NET - 90558C														
CORE														
PROGRAM-SPECIFIC	5,588,529	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00
FEDERAL FUNDS	5,588,529	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00
TOTAL	\$5,588,529	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00
TOTAL - PHYSICIAN PAYMENTS SAFETY NET	\$5,588,529	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.520 MO HealthNet Divisions – Federally Qualified Health Centers FQHCs

Book 5, page 389

This section provides funding for FQHCs to expand access to primary care services for underserved individuals by expanding hours of operation, defraying costs for the uninsured and funding provider staff and infrastructure.

Legal Base: RSMo 208.152, 208.166, 660.026; Federal – Social Security Act Section Number: 1905(a) (2), 42 CFR 440.210 and 440.500.
Funding Sources: General Revenue and Healthcare Technology Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reduction: (\$3,270,000) OTHER PSD core reduction of one-time funding from the MO Senior Services Protection Fund
 (\$3,170,310) FED PSD core reduction due to change in enhanced FMAP for Health Home model program – corresponding NDI to increase GR

HOUSE:

Same as Governor – no additional changes

SENATE:

Same as Governor – no additional changes

CONFERENCE:

Same as Governor – no additional changes

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.520														
FQHC DISTRIBUTION - 90559C														
CORE														
PROGRAM-SPECIFIC	10,400,213	0.00	15,570,000	0.00	9,129,690	0.00	9,129,690	0.00	9,129,690	0.00	9,129,690	0.00	9,129,690	0.00
GENERAL REVENUE	3,899,400	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
FEDERAL FUNDS	6,500,813	0.00	10,800,000	0.00	7,629,690	0.00	7,629,690	0.00	7,629,690	0.00	7,629,690	0.00	7,629,690	0.00
OTHER FUNDS	0	0.00	3,270,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$10,400,213	0.00	\$15,570,000	0.00	\$9,129,690	0.00	\$9,129,690	0.00	\$9,129,690	0.00	\$9,129,690	0.00	\$9,129,690	0.00

MHD GR Pickup - 1886002

PROGRAM-SPECIFIC	0	0.00	0	0.00	3,270,000	0.00	3,270,000	0.00	3,270,000	0.00	3,270,000	0.00	3,270,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	3,270,000	0.00	3,270,000	0.00	3,270,000	0.00	3,270,000	0.00	3,270,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$3,270,000	0.00	\$3,270,000	0.00	\$3,270,000	0.00	\$3,270,000	0.00	\$3,270,000	0.00

General Revenue funding is requested to replace Pharmacy Rebates funding (\$14,950,905). Revenues are projected to be less than appropriated amounts in FY 2014. In addition, the FY 2014 budget included the Missouri Senior Services Protection Fund in Blind Medical (\$21,489,941) (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) and Federally Qualified Health Center (\$3,270,000) programs as one-time. GR is requested to replace this one-time funding. General Revenue is requested to replace Blind Pension Premium Fund (\$3,632,576) budgeted in Blind Pension Medical -- (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) Also, GR is requested to replace one-time Premium Fund cash balance in Hospital program (\$10,011,950). Senate rec includes a fund switch of \$2.5 million of GR to Premium Fund in Hospital section

FQHC Health Homes - 1886007

PROGRAM-SPECIFIC	0	0.00	0	0.00	3,170,310	0.00	2,049,459	0.00	2,049,459	0.00	2,049,459	0.00	2,049,459	0.00
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Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.520														
FQHC DISTRIBUTION - 90559C														
FQHC Health Homes - 1886007														
PROGRAM-SPECIFIC	0	0.00	0	0.00	3,170,310	0.00	2,049,459	0.00	2,049,459	0.00	2,049,459	0.00	2,049,459	0.00
GENERAL REVENUE	0	0.00	0	0.00	3,170,310	0.00	2,049,459	0.00	2,049,459	0.00	2,049,459	0.00	2,049,459	0.00
TOTAL	\$0	0.00	\$0	0.00	\$3,170,310	0.00	\$2,049,459	0.00	\$2,049,459	0.00	\$2,049,459	0.00	\$2,049,459	0.00

The MO HealthNet Division has implemented a Health Home provider program in accordance with Section 2703 of the Affordable Care Act of 2010. Health Home sites receive per-member-per-month (PMPM) payments for the additional services they are required to perform. Most of the primary care sites in the Health Home program are FQHC sites. Currently, Health Homes are funded at 90% federal match, which will continue through December 2013. For Health Home payments beginning January 1, 2014, the federal match rate reverts to the standard FMAP.

TOTAL - FQHC DISTRIBUTION	\$10,400,213	0.00	\$15,570,000	0.00	\$15,570,000	0.00	\$14,449,149	0.00	\$14,449,149	0.00	\$14,449,149	0.00	\$14,449,149	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.525 **MO HealthNet Division – IGT Health Care Homes**

Book 5, page 402

This section provides funding for payments for MO HealthNet participants with chronic conditions through intergovernmental transfers for health home sites affiliated with public entities. Health home sites will receive per-member-per-month (PMPM) payments for the additional services they will be required to perform.

Legal Base: Federal law – Section 2703 of the Affordable Care Act & Section 1945 of Title XIX of the Social Security Act

Funding Sources: Federal funds and Intergovernmental Transfer (IGT) fund

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

No changes

CONFERENCE:

No changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.525														
IGT HEALTH CARE HOME - 90574C														
CORE														
PROGRAM-SPECIFIC	2,575,887	0.00	7,600,000	0.00	7,600,000	0.00	7,600,000	0.00	7,600,000	0.00	7,600,000	0.00	7,600,000	0.00
FEDERAL FUNDS	2,318,135	0.00	6,900,000	0.00	6,900,000	0.00	6,900,000	0.00	6,900,000	0.00	6,900,000	0.00	6,900,000	0.00
OTHER FUNDS	257,752	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00
TOTAL	\$2,575,887	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00
TOTAL - IGT HEALTH CARE HOME	\$2,575,887	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.527 **MO HealthNet Division – Foster Kids Health Home Pilot Program**

Book N/A

New section created by the House that provides funding for a Medical and Behavior Health Home pilot program at SSM Cardinal Glennon Children’s Medical Center in St. Louis for kids in Foster Care.

Legal Base:
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
New section recommended by the House

GOVERNOR:
New section recommended by the House

HOUSE:
New section recommended by the House

SENATE:
Same as House – no additional changes

CONFERENCE:
Same as House – no additional changes

VETOES:
NDI veto: **\$2,500,000 (\$250,000 GR & \$2,250,000 FED) – NDI to establish a Medical and Behavior Health Home for children in Foster Care**

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.527														
FOSTER KIDS HEALTH HOME - 90575C														
Foster Kids Medical & BH Home - 1886034														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	250,000	0.00	250,000	0.00	250,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	2,250,000	0.00	2,250,000	0.00	2,250,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00
Provides funding for a Medical and Behavior Health Home for Kids in Foster Care for a pilot program at SSM Cardinal Glennon Children's Medical Center in St. Louis.													<i>Victor</i>	

TOTAL - FOSTER KIDS HEALTH HOME	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.528 **MO HealthNet Division – Asthma Services**

Book N/A

New section created by the House that provides funding for asthma educational services and environmental home assessments.

Legal Base:

Funding Sources: General Revenue and Federal

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

New section recommended by the House

SENATE:

Removed funding from the bill – deletes section

CONFERENCE:

Restored funding to bill – same as House recommendation

VETOES:

NDI veto: **\$5,240,330 (\$524,033 GR & \$4,716,297 FED) – NDI for asthma educational services and environmental home assessments**

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.528														
ASTHMA SERVICES - 90576C														
Asthma Services - 1886032														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	5,240,330	0.00	0	0.00	5,240,330	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	524,033	0.00	0	0.00	524,033	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	4,716,297	0.00	0	0.00	4,716,297	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,240,330	0.00	\$0	0.00	\$5,240,330	0.00
Provides funding for asthma educational services and enviornmental home assessments.													Vetred	

TOTAL - ASTHMA SERVICES	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,240,330	0.00	\$0	0.00	\$5,240,330	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.529 **MO HealthNet Division – Regional Care Coordination Model**

Book N/A

New section created by the House that provides funding to develop a Regional Care Coordination Model(s) among networks of health care providers to meet the needs of and costs incurred by Medicaid beneficiaries that frequently and inefficiently utilize emergency department (ED) services. This pilot project, with communities surrounding the Christian Hospital in St. Louis, shall create a model to be replicated across the state.

Legal Base:

Funding Sources: General Revenue and Federal

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

New section recommended by the House

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

VETOES:

NDI veto: **\$5,000,000 (\$250,000 GR & \$4,500,000 FED) – NDI to develop a Regional Care Coordination Model in St. Louis**

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.529														
REGIONAL CARE COORDINATION - 90578C														
Regional Care Coordination - 1886041														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	500,000	0.00	500,000	0.00	500,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	4,500,000	0.00	4,500,000	0.00	4,500,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00
The Department of Social Services shall develop a Regional Care Coordination Model(s) among existing network(s) of health care providers to meet the needs of and reduce the costs incurred by Medicaid beneficiaries that frequently and inefficiently utilize emergency department (ED) services. This pilot project in the St. Louis region, shall create a model to be replicated across the state.													<i>Verfied</i>	

TOTAL - REGIONAL CARE COORDINATION	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.530 MO HealthNet Division – Federal Reimbursement Allowance

Book 5, page 409

This section provides funding for the federal reimbursement allowance hospital care program under Title XIX of the Social Security Act.

Legal Base: RSMo 208.453; Federal – Social Security Act Section Number: 1903(w), 42 CFR 433 Subpart B.
Funding Sources: Federal Reimbursement Allowance (FRA)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
Requested an “E”

GOVERNOR:
Recommended an “E”

HOUSE:
House removed the “E”

SENATE:
Restored the “E”

CONFERENCE:
Same as Senate – no additional changes

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.530														
FED REIMB ALLOWANCE - 90553C														
CORE														
EXPENSE & EQUIPMENT	437,675	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	437,675	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	1,011,146,024	0.00	1,022,818,734	0.00	1,022,818,734	0.00	1,022,818,734	0.00	1,022,818,734	0.00	1,022,818,734	0.00	1,022,818,734	0.00
OTHER FUNDS	1,011,146,024	0.00	1,022,818,734E	0.00	1,022,818,734E	0.00	1,022,818,734E	0.00	1,022,818,734	0.00	1,022,818,734E	0.00	1,022,818,734E	0.00
TOTAL	\$1,011,583,699	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00
Authority Increase Removed E - 1886042														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	429,411,080	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	429,411,080	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$429,411,080	0.00	\$0	0.00	\$0	0.00
TOTAL - FED REIMB ALLOWANCE	\$1,011,583,699	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,452,229,814	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.535 MO HealthNet Division – Intergovernmental Transfer (IGT)

Book 5, page 417

This section provides the accounting mechanism for the transfer of funds from the DSS Intergovernmental Transfer (IGT) Fund to the General Revenue Fund for the purpose of providing the state match for Medicaid payments.

Legal Base: N/A
Funding Sources: Intergovernmental Transfer (IGT) Fund
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
Requested an “E”

GOVERNOR:
Recommended an “E”

HOUSE:
House removed the “E”

SENATE:
Same as House – no additional changes

CONFERENCE:
Same as House – no additional changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.535														
IGT EXPEND TRANSFER - 90570C														
CORE														
FUND TRANSFERS	86,141,041	0.00	86,456,256	0.00	86,456,256	0.00	86,456,256	0.00	86,456,256	0.00	86,456,256	0.00	86,456,256	0.00
OTHER FUNDS	86,141,041	0.00	86,456,256	0.00	86,456,256 E	0.00	86,456,256 E	0.00	86,456,256	0.00	86,456,256	0.00	86,456,256	0.00
TOTAL	\$86,141,041	0.00	\$86,456,256	0.00	\$86,456,256	0.00	\$86,456,256	0.00	\$86,456,256	0.00	\$86,456,256	0.00	\$86,456,256	0.00
MHD Transfer Authority - 1886014														
FUND TRANSFERS	0	0.00	0	0.00	10,428,959	0.00	10,428,959	0.00	10,428,959	0.00	10,428,959	0.00	10,428,959	0.00
OTHER FUNDS	0	0.00	0	0.00	10,428,959 E	0.00	10,428,959 E	0.00	10,428,959	0.00	10,428,959	0.00	10,428,959	0.00
TOTAL	\$0	0.00	\$0	0.00	\$10,428,959	0.00	\$10,428,959	0.00	\$10,428,959	0.00	\$10,428,959	0.00	\$10,428,959	0.00
Aligns budget authority with planned transfers. Intergovernmental transfers and transfer appropriations related to the provider taxes demonstrate to the federal government that there is state match to draw down Medicaid federal funds for allowable costs under the Medicaid program.														
TOTAL - IGT EXPEND TRANSFER	\$86,141,041	0.00	\$86,456,256	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.540 MO HealthNet Division – Payments to Tier 1 Safety Net Hospitals with Intergovernmental Transfer (IGT)

Book 5, Page 424

This section provides the accounting mechanism for the payment of funds to Tier 1 Safety Net Hospitals using Intergovernmental transfers. Payments from this program are made to MU Hospitals and Clinics; MO Rehabilitation Center; and Truman Medical Center.

Legal Base: N/A
Funding Sources: Intergovernmental Transfer (IGT) Fund & Federal Funds
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
No changes

GOVERNOR:
No changes

HOUSE:
No changes

SENATE:
No changes

CONFERENCE:
No changes

Committee Markup Annual

	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.540														
IGT SAFETY NET HOSPITALS - 90571C														
CORE														
PROGRAM-SPECIFIC	168,379,866	0.00	199,854,549	0.00	199,854,549	0.00	199,854,549	0.00	199,854,549	0.00	199,854,549	0.00	199,854,549	0.00
FEDERAL FUNDS	104,861,346	0.00	129,505,748	0.00	129,505,748	0.00	129,505,748	0.00	129,505,748	0.00	129,505,748	0.00	129,505,748	0.00
OTHER FUNDS	63,518,520	0.00	70,348,801	0.00	70,348,801	0.00	70,348,801	0.00	70,348,801	0.00	70,348,801	0.00	70,348,801	0.00
TOTAL	\$168,379,866	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00
TOTAL - IGT SAFETY NET HOSPITALS	\$168,379,866	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.545 MO HealthNet Division – Intergovernmental Transfer (IGT) for DMH Medicaid Program

Book 5, Page 431

This section provides funding to allow MO HealthNet to pay DMH for CSTAR and CPR services using the certified public expenditures (CPE) process and Intergovernmental Transfer (IGT). This transfer proves to CMS that the state match is available for the CPR and CSTAR programs.

Legal Base: N/A
Funding Sources: Intergovernmental Transfer (IGT) Fund
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
Requested an “E”

GOVERNOR:
Recommended an “E”

HOUSE:
House removed the “E”

SENATE:
Same as House – no additional changes

CONFERENCE:
Same as House – no additional changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.545														
IGT DMH MEDICAID PROGRAM - 90572C														
CORE														
PROGRAM-SPECIFIC	261,060,282	0.00	292,590,597	0.00	292,590,597	0.00	292,590,597	0.00	292,590,597	0.00	292,590,597	0.00	292,590,597	0.00
FEDERAL FUNDS	162,205,417	0.00	181,011,173	0.00	181,011,173 E	0.00	181,011,173 E	0.00	181,011,173	0.00	181,011,173	0.00	181,011,173	0.00
OTHER FUNDS	98,854,865	0.00	111,579,424	0.00	111,579,424 E	0.00	111,579,424 E	0.00	111,579,424	0.00	111,579,424	0.00	111,579,424	0.00
TOTAL	\$261,060,282	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$292,590,597	0.00
Authority Increase Removed E - 1886042														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	21,000,000	0.00	21,000,000	0.00	21,000,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	13,000,000	0.00	13,000,000	0.00	13,000,000	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$21,000,000	0.00	\$21,000,000	0.00	\$21,000,000	0.00
TOTAL - IGT DMH MEDICAID PROGRAM	\$261,060,282	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$313,590,597	0.00	\$313,590,597	0.00	\$313,590,597	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.550 **MO HealthNet Division – Women’s Health Services**

Book 5, page 438

Provides funding for women’s health services provided to MO HealthNet participants covered through the 1115 Waiver.

Legal Base: RSMo 208.453, 208.152, 208.153; Federal – Social Security Act Section Number 1115, 2100, 1903(w), 1923 (a-f), 42 CFR 433 Subpart B and 412.106.
Funding Sources: General Revenue, Federal, Federal Reimbursement Allowance (FRA), and Pharmacy Federal Reimbursement Allowance (PFRA)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$31,261) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$31,261 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$31,261) GR PSD core reduction due to estimated lapse
(\$31,033) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.550														
WOMEN'S HEALTH SRVC - 90554C														
CORE														
PROGRAM-SPECIFIC	9,262,406	0.00	10,540,915	0.00	10,540,915	0.00	10,509,654	0.00	10,478,621	0.00	10,478,621	0.00	10,478,621	0.00
GENERAL REVENUE	1,845,337	0.00	1,259,044	0.00	1,259,044	0.00	1,227,783	0.00	1,196,750	0.00	1,196,750	0.00	1,196,750	0.00
FEDERAL FUNDS	7,155,930	0.00	9,065,081	0.00	9,065,081	0.00	9,065,081	0.00	9,065,081	0.00	9,065,081	0.00	9,065,081	0.00
OTHER FUNDS	261,139	0.00	216,790	0.00	216,790	0.00	216,790	0.00	216,790	0.00	216,790	0.00	216,790	0.00
TOTAL	\$9,262,406	0.00	\$10,540,915	0.00	\$10,540,915	0.00	\$10,509,654	0.00	\$10,478,621	0.00	\$10,478,621	0.00	\$10,478,621	0.00

MHD Cost to Continue - 1886008

PROGRAM-SPECIFIC	0	0.00	0	0.00	126,860	0.00	0	0.00	36,133	0.00	36,133	0.00	36,133	0.00
GENERAL REVENUE	0	0.00	0	0.00	126,860	0.00	0	0.00	36,133	0.00	36,133	0.00	36,133	0.00
TOTAL	\$0	0.00	\$0	0.00	\$126,860	0.00	\$0	0.00	\$36,133	0.00	\$36,133	0.00	\$36,133	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections. Senate rec for Pharmacy section includes a fund switch of \$10 million of GR to Surplus Revenue Fund and \$2.5 million of GR to Pharmacy Rebates Fund. TAFP rec same as Senate.

Pharmacy PMPM Increase - 1886010

PROGRAM-SPECIFIC	0	0.00	0	0.00	205,537	0.00	184,983	0.00	205,537	0.00	205,537	0.00	205,537	0.00
GENERAL REVENUE	0	0.00	0	0.00	20,554	0.00	0	0.00	20,554	0.00	20,554	0.00	20,554	0.00

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.550														
WOMEN'S HEALTH SRVC - 90554C														
Pharmacy PMPM Increase - 1886010														
PROGRAM-SPECIFIC	0	0.00	0	0.00	205,537	0.00	184,983	0.00	205,537	0.00	205,537	0.00	205,537	0.00
FEDERAL FUNDS	0	0.00	0	0.00	184,983	0.00	184,983	0.00	184,983	0.00	184,983	0.00	184,983	0.00
TOTAL	\$0	0.00	\$0	0.00	\$205,537	0.00	\$184,983	0.00	\$205,537	0.00	\$205,537	0.00	\$205,537	0.00
This decision item requests funding for the on-going inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures due to increased utilization and therapies.														

FMAP Adjustment - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	31,033	0.00	31,033	0.00	31,033	0.00	31,033	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	31,033	0.00	31,033	0.00	31,033	0.00	31,033	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$31,033	0.00	\$31,033	0.00	\$31,033	0.00	\$31,033	0.00

This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.

Medicaid expansion - 1886019

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(765,108)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(630,866)	0.00	0	0.00	0	0.00	0	0.00

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.550														
WOMEN'S HEALTH SRVC - 90554C														
Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(765,108)	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	(134,242)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$765,108)	0.00	\$0	0.00	\$0	0.00	\$0	0.00

Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.

TOTAL - WOMEN'S HEALTH SRVC	\$9,262,406	0.00	\$10,540,915	0.00	\$10,873,312	0.00	\$9,960,562	0.00	\$10,751,324	0.00	\$10,751,324	0.00	\$10,751,324	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.555 MO HealthNet Division – Children’s Health Insurance Program (CHIP)

Book 5, page 447

For the purpose of funding programs approved by the Director of Social Services designed to enhance access to care for uninsured children. The state children’s health insurance program (CHIP) Title XXI funds are used for this expanded MO HealthNet population.	
Legal Base:	RSMo 208.453, 208.152, 208.153; Federal – Social Security Act Section Number 1115, 2100, 1903(w), 1923 (a-f), 42 CFR 433 Subpart B and 412.106.
Funding Sources:	General Revenue, Federal, Federal Reimbursement Allowance (FRA), Health Initiatives (HIF), Pharmacy Rebates (REBATE), Premium (PREMIUM), Medicaid Managed Care Organization Reimbursement Allowance, and Pharmacy Reimbursement Allowance
FY 2014 GR W/H:	\$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation In: \$13,307 GR PSD reallocated in from the Physician section

HOUSE:

Core Reallocation Out: (\$13,307) GR PSD reallocated out – reversed the Governor’s core reallocation
Core Reduction: (\$1,554,551) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

Core Reduction: (\$9,808,765) PSD (GR \$2,533,604 & FED \$7,275,161) core reduction due to estimation that 5,000 children would move to Health Insurance Exchange

CONFERENCE:

Same as Senate – no additional changes

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.555														
CHILDREN'S HEALTH INS PROGRAM - 90556C														
CORE														
PROGRAM-SPECIFIC	171,919,507	0.00	180,875,309	0.00	180,875,309	0.00	180,888,616	0.00	179,320,758	0.00	169,511,993	0.00	169,511,993	0.00
GENERAL REVENUE	27,758,255	0.00	30,607,523	0.00	30,607,523	0.00	30,620,830	0.00	29,052,972	0.00	26,519,368	0.00	26,519,368	0.00
FEDERAL FUNDS	125,688,850	0.00	132,920,538	0.00	132,920,538	0.00	132,920,538	0.00	132,920,538	0.00	125,645,377	0.00	125,645,377	0.00
OTHER FUNDS	18,472,402	0.00	17,347,248	0.00	17,347,248	0.00	17,347,248	0.00	17,347,248	0.00	17,347,248	0.00	17,347,248	0.00
TOTAL	\$171,919,507	0.00	\$180,875,309	0.00	\$180,875,309	0.00	\$180,888,616	0.00	\$179,320,758	0.00	\$169,511,993	0.00	\$169,511,993	0.00

MHD Cost to Continue - 1886008

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	4,214,783	0.00	4,214,783	0.00	4,214,783	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	2,042,125	0.00	2,042,125	0.00	2,042,125	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	2,172,658	0.00	2,172,658	0.00	2,172,658	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$4,214,783	0.00	\$4,214,783	0.00	\$4,214,783	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections. Senate rec for Pharmacy section includes a fund switch of \$10 million of GR to Surplus Revenue Fund and \$2.5 million of GR to Pharmacy Rebates Fund. TAFP rec same as Senate.

Pharmacy PMPM Increase - 1886010

PROGRAM-SPECIFIC	0	0.00	0	0.00	2,123,881	0.00	1,559,353	0.00	2,123,881	0.00	2,123,881	0.00	2,123,881	0.00
GENERAL REVENUE	0	0.00	0	0.00	564,528	0.00	0	0.00	564,528	0.00	564,528	0.00	564,528	0.00

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.555														
CHILDREN'S HEALTH INS PROGRAM - 90556C														
Pharmacy PMPM Increase - 1886010														
PROGRAM-SPECIFIC	0	0.00	0	0.00	2,123,881	0.00	1,559,353	0.00	2,123,881	0.00	2,123,881	0.00	2,123,881	0.00
FEDERAL FUNDS	0	0.00	0	0.00	1,559,353	0.00	1,559,353	0.00	1,559,353	0.00	1,559,353	0.00	1,559,353	0.00
TOTAL	\$0	0.00	\$0	0.00	\$2,123,881	0.00	\$1,559,353	0.00	\$2,123,881	0.00	\$2,123,881	0.00	\$2,123,881	0.00
This decision item requests funding for the on-going inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures due to increased utilization and therapies.														

Managed Care Acturial Increase - 1886009														
PROGRAM-SPECIFIC	0	0.00	0	0.00	4,191,862	0.00	3,077,665	0.00	4,877,827	0.00	4,877,827	0.00	4,877,827	0.00
GENERAL REVENUE	0	0.00	0	0.00	1,114,197	0.00	0	0.00	1,800,162	0.00	1,800,162	0.00	1,800,162	0.00
FEDERAL FUNDS	0	0.00	0	0.00	3,077,665	0.00	3,077,665	0.00	3,077,665	0.00	3,077,665	0.00	3,077,665	0.00
TOTAL	\$0	0.00	\$0	0.00	\$4,191,862	0.00	\$3,077,665	0.00	\$4,877,827	0.00	\$4,877,827	0.00	\$4,877,827	0.00
Funding is needed to fund an increase for Managed Care medical, delivery and Neonatal Intensive Care Unit services to ensure that managed care payments are actuarially sound. Funding is for the Eastern, Central and Western regions for July 2014 through June 2015. MO HealthNet needs to maintain capitation rates at a sufficient level to ensure continued health plan and provider participation. Federal rules and regulations require that capitation payments made on behalf of managed care participants be actuarially sound. Further, the state must provide the actuarial certification of the capitation rates to the CMS. The CMS Regional Office must review and approve all contracts for managed care as a condition for federal financial participation.														

FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,554,551	0.00	1,554,551	0.00	1,554,551	0.00	1,554,551	0.00

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE

HOUSE BILL SECTION 11.555														
CHILDREN'S HEALTH INS PROGRAM - 90556C														
FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,554,551	0.00	1,554,551	0.00	1,554,551	0.00	1,554,551	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,554,551	0.00	1,554,551	0.00	1,554,551	0.00	1,554,551	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,554,551	0.00	\$1,554,551	0.00	\$1,554,551	0.00	\$1,554,551	0.00

This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.

Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(9,808,765)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(1,988,879)	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	(7,275,161)	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	(544,725)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$9,808,765)	0.00	\$0	0.00	\$0	0.00	\$0	0.00

Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.

TOTAL - CHILDREN'S HEALTH INS PROGRAM	\$171,919,507	0.00	\$180,875,309	0.00	\$187,191,052	0.00	\$177,271,420	0.00	\$192,091,800	0.00	\$182,283,035	0.00	\$182,283,035	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.560 **MO HealthNet Division – Transitional Medicaid (ACA Medicaid Expansion)**

Book 5, Page 82

New section recommended by the Governor to expand Medicaid coverage to non-elderly, low income adults up to 138% of the Federal Poverty Level.

Legal Base: Affordable Care Act
Funding Sources: Federal Funds
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the Governor.

GOVERNOR:

New section recommended by the Governor.

HOUSE:

Removed section from budget

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.560														
TRANSITIONAL MEDICAID - 90584C														
Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,642,736,262	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,642,736,262	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,642,736,262	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														
TOTAL - TRANSITIONAL MEDICAID	\$0	0.00	\$0	0.00	\$0	0.00	\$1,642,736,262	0.00	\$0	0.00	\$0	0.00	\$0	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.565 & 11.570 MO HealthNet Division – Federal Reimbursement Allowance Transfer

Book 5, Page 458 & 464

These transfer sections allow funding to be transferred between General Revenue and the Federal Reimbursement Allowance Fund.

Funding Sources: General Revenue and Federal Reimbursement Allowance Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
Requested an “E”

GOVERNOR:
Recommended an “E”

HOUSE:
House removed the “E”

SENATE:
Same as House – no additional changes

CONFERENCE:
Same as House – no additional changes

Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.565														
GR FRA-TRANSFER - 90840C														
CORE														
FUND TRANSFERS	538,406,226	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00
GENERAL REVENUE	538,406,226	0.00	569,173,828	0.00	569,173,828 E	0.00	569,173,828 E	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00
TOTAL	\$538,406,226	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00
MHD Transfer Authority - 1886014														
FUND TRANSFERS	0	0.00	0	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00
GENERAL REVENUE	0	0.00	0	0.00	15,438,909 E	0.00	15,438,909 E	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00
TOTAL	\$0	0.00	\$0	0.00	\$15,438,909	0.00	\$15,438,909	0.00	\$15,438,909	0.00	\$15,438,909	0.00	\$15,438,909	0.00
Aligns budget authority with planned transfers. Intergovernmental transfers and transfer appropriations related to the provider taxes demonstrate to the federal government that there is state match to draw down Medicaid federal funds for allowable costs under the Medicaid program.														
TOTAL - GR FRA-TRANSFER	\$538,406,226	0.00	\$569,173,828	0.00	\$584,612,737	0.00	\$584,612,737	0.00	\$584,612,737	0.00	\$584,612,737	0.00	\$584,612,737	0.00

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		Regular House Bills	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		TRULY AGREED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.570														
FED REIMBURSE ALLOW-TRANSFER - 90845C														
CORE														
FUND TRANSFERS	538,406,226	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00
OTHER FUNDS	538,406,226	0.00	569,173,828	0.00	569,173,828 E	0.00	569,173,828 E	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00
TOTAL	\$538,406,226	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00

MHD Transfer Authority - 1886014

FUND TRANSFERS	0	0.00	0	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00
OTHER FUNDS	0	0.00	0	0.00	15,438,909 E	0.00	15,438,909 E	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00
TOTAL	\$0	0.00	\$0	0.00	\$15,438,909	0.00	\$15,438,909	0.00	\$15,438,909	0.00	\$15,438,909	0.00	\$15,438,909	0.00

Aligns budget authority with planned transfers. Intergovernmental transfers and transfer appropriations related to the provider taxes demonstrate to the federal government that there is state match to draw down Medicaid federal funds for allowable costs under the Medicaid program.

TOTAL - FED REIMBURSE ALLOW-TRANSFEI	\$538,406,226	0.00	\$569,173,828	0.00	\$584,612,737	0.00	\$584,612,737	0.00	\$584,612,737	0.00	\$584,612,737	0.00	\$584,612,737	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.575 & 11.580 MO HealthNet Division – Nursing Facility FRA Transfer

Book 5, Pages 470 & 476

These transfer sections allow funding to be transferred between General Revenue and the Nursing Facility Federal reimbursement Allowance Fund.

Legal Basis: N/A
Funding Sources: General Revenue and Nursing Facility Federal Reimbursement Allowance (NFFRA)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Requested an “E”

GOVERNOR:

Recommended an “E”

HOUSE:

House removed the “E”

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

Committee Markup Annual

Committee Markup Annual			FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED			
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.575																
GR NFFRA-TRANSFER - 90850C																
CORE																
FUND TRANSFERS	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00		
GENERAL REVENUE	161,893,866	0.00	161,893,866	0.00	161,893,866 E	0.00	161,893,866 E	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00		
TOTAL	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00		

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Regular House Bills

[illegible]

MHD Transfer Authority - 1886014														
FUND TRANSFERS	0	0.00	0	0.00	49,056,644	0.00	49,056,644	0.00	49,056,644	0.00	49,056,644	0.00	49,056,644	0.00
OTHER FUNDS	0	0.00	0	0.00	49,056,644 E	0.00	49,056,644 E	0.00	49,056,644	0.00	49,056,644	0.00	49,056,644	0.00
TOTAL	\$0	0.00	\$0	0.00	\$49,056,644	0.00	\$49,056,644	0.00	\$49,056,644	0.00	\$49,056,644	0.00	\$49,056,644	0.00

Aligns budget authority with planned transfers. Intergovernmental transfers and transfer appropriations related to the provider taxes demonstrate to the federal government that there is state match to draw down Medicaid federal funds for allowable costs under the Medicaid program.

TOTAL - NURSING FACILITY REIM-TRANSFERS	\$161,893,866	0.00	\$161,893,866	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.585 MO HealthNet Division – Nursing Home Program - NFFRA Transfer to Quality of Care Fund

Book 5, Page 483

This section transfers moneys from the Nursing Facility Federal Reimbursement Allowance Fund to the Nursing Facility Quality of Care Fund to be used for additional inspections and other quality of care activities.

Funding Sources: Nursing Facility Federal Reimbursement Allowance (NFFRA)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
No changes

GOVERNOR:
No changes

HOUSE:
No changes

SENATE:
No changes

CONFERENCE:
No changes

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.585														
NURSING FACILITY QLTY-TRANSFER - 90860C														
CORE														
FUND TRANSFERS	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
OTHER FUNDS	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
TOTAL	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00
TOTAL - NURSING FACILITY QLTY-TRANSFEE	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.590 MO HealthNet Division – Nursing Facility Federal Reimbursement Allowance Payments

Book 5, page 490

This section provides funding for per diem payments for patient care provided in nursing facilities under Title XIX of the Social Security Act.

Legal Base: RSMo 198.401; Federal – Social Security Act Section Number 1903 (w), 42 CFR 443 Subpart B.
Funding Sources: Nursing Facility Federal Reimbursement Allowance (NFFRA)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE

No changes

CONFERENCE:

No changes

Committee Markup Annual

FY 2015 - HB 2011 SOCIAL SERVICES

Regular House Bills

[illegible]

Long Term Care Rate Increase - 1886020														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	10,429,340	0.00	10,429,340	0.00	10,429,340	0.00	10,429,340	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	10,429,340	0.00	10,429,340	0.00	10,429,340	0.00	10,429,340	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$10,429,340	0.00	\$10,429,340	0.00	\$10,429,340	0.00	\$10,429,340	0.00

GOVERNOR REC: Funding for a rate increase to long term care providers. Includes a \$2.50 per diem rate increase for nursing facilities with an additional \$1.25 trend factor increase from NFFRA (\$3.75 Total), and a 2% rate increase for hospice and home health providers. HOUSE COMM SUB REC: Same as Gov Rec with an additional rate increase for home health of \$1,517,410 (\$560,000 GR and \$957,410 FED).

TOTAL - NURSING FACILITY FED REIMB AL	\$284,584,398	0.00	\$301,027,717	0.00	\$301,027,717	0.00	\$311,457,057	0.00	\$311,457,057	0.00	\$311,457,057	0.00	\$311,457,057	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.595 MO HealthNet Division – Department of Elementary and Secondary Education (DESE) Services

Book 5, page 500

This section provides funding for the federal match related DESE Medicaid services, including school based administrative services and Early Periodic Screening, Diagnosis, and Treatment (EPSDT) services.

Legal Base: N/A
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No changes

GOVERNOR:
No changes

HOUSE:
No changes

SENATE:
No changes

CONFERENCE:
No changes

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Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.595														
SCHOOL DISTRICT CLAIMING - 90569C														
CORE														
PROGRAM-SPECIFIC	19,622,983	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00
GENERAL REVENUE	69,954	0.00	69,954	0.00	69,954	0.00	69,954	0.00	69,954	0.00	69,954	0.00	69,954	0.00
FEDERAL FUNDS	19,553,029	0.00	54,653,770	0.00	54,653,770	0.00	54,653,770	0.00	54,653,770	0.00	54,653,770	0.00	54,653,770	0.00
TOTAL	\$19,622,983	0.00	\$54,723,724	0.00	\$54,723,724	0.00	\$54,723,724	0.00	\$54,723,724	0.00	\$54,723,724	0.00	\$54,723,724	0.00

TOTAL - SCHOOL DISTRICT CLAIMING	\$19,622,983	0.00	\$54,723,724	0.00	\$54,723,724	0.00	\$54,723,724	0.00	\$54,723,724	0.00	\$54,723,724	0.00	\$54,723,724	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.600 **MO HealthNet Division – Blind Pension Medical**

Book 5, page 509

This section provides funding for a state only health care benefit for non-Medicaid blind individuals who qualify for the Blind Pension benefit.

Legal Base: RSMo 208.151, 208.152

Funding Sources: General Revenue, Health Initiatives (HIF), and Pharmacy Federal Reimbursement Allowance (PFRA)

FY 2013 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core Reduction: (\$25,122,517) OTHER PSD core reduction of one-time funding from the Mo Senior Services Protection Fund (\$21,489,941) and Blind Pension Premium Fund (\$3,632,576)

GOVERNOR:

Core Reallocation In: \$4,580,479 GR PSD reallocated in from the Physician section - \$899,416 and Hospital section - \$3,681,063

HOUSE:

Core Reallocation Out: (\$4,580,479) GR PSD reallocated out – reversed the Governor’s core reallocation

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

Committee Markup Annual

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Regular House Bills

	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.600														
BLIND PENSION MEDICAL BENEFITS - 90573C														
CORE														
PROGRAM-SPECIFIC	0	0.00	25,122,517	0.00	0	0.00	4,580,479	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	4,580,479	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	25,122,517	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$25,122,517	0.00	\$0	0.00	\$4,580,479	0.00	\$0	0.00	\$0	0.00	\$0	0.00

MHD Cost to Continue - 1886008

PROGRAM-SPECIFIC	0	0.00	0	0.00	6,446,982	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	6,446,982	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$6,446,982	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections. Senate rec for Pharmacy section includes a fund switch of \$10 million of GR to Surplus Revenue Fund and \$2.5 million of GR to Pharmacy Rebates Fund. TAFP rec same as Senate.

MHD GR Pickup - 1886002

PROGRAM-SPECIFIC	0	0.00	0	0.00	25,122,517	0.00	25,122,517	0.00	0	0.00	0	0.00	0	0.00
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Committee Markup Annual	FY 2015 - HB 2011 SOCIAL SERVICES												Regular House Bills	
	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE

HOUSE BILL SECTION 11.600														
BLIND PENSION MEDICAL BENEFITS - 90573C														
MHD GR Pickup - 1886002														
PROGRAM-SPECIFIC	0	0.00	0	0.00	25,122,517	0.00	25,122,517	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	25,122,517	0.00	25,122,517	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$25,122,517	0.00	\$25,122,517	0.00	\$0	0.00	\$0	0.00	\$0	0.00

General Revenue funding is requested to replace Pharmacy Rebates funding (\$14,950,905). Revenues are projected to be less than appropriated amounts in FY 2014. In addition, the FY 2014 budget included the Missouri Senior Services Protection Fund in Blind Medical (\$21,489,941) (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) and Federally Qualified Health Center (\$3,270,000) programs as one-time. GR is requested to replace this one-time funding. General Revenue is requested to replace Blind Pension Premium Fund (\$3,632,576) budgeted in Blind Pension Medical -- (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) Also, GR is requested to replace one-time Premium Fund cash balance in Hospital program (\$10,011,950). Senate rec includes a fund switch of \$2.5 million of GR to Premium Fund in Hospital section

Pharmacy PMPM Increase - 1886010														
PROGRAM-SPECIFIC	0	0.00	0	0.00	458,176	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	458,176	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$458,176	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

This decision item requests funding for the on-going inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures due to increased utilization and therapies.

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	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.600														
BLIND PENSION MEDICAL BENEFITS - 90573C														
Medicaid expansion - 1886019														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	(559,770)	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	(559,770)	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	(\$559,770)	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														

TOTAL - BLIND PENSION MEDICAL BENEFITS	\$0	0.00	\$25,122,517	0.00	\$32,027,675	0.00	\$29,143,226	0.00	\$0	0.00	\$0	0.00	\$0	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.605 MO HealthNet Division – Medicaid Supplemental Pool

Book 5, page 517

This section provides additional funding for any Medicaid program or the state medical program that was provided an appropriation for the fiscal year. This pool is meant to prevent large Medicaid supplemental appropriations resulting from significant caseload growth.

Legal Base: various Medicaid citations previously noted.
Fund Sources: Federal, Uncompensated Care (UC), Pharmacy Rebates (REBATES), Third Party Liability Collections (TPL), Federal Reimbursement Allowance (FRA), Premium (PREM), and Nursing Facility Federal Reimbursement Allowance
FY 2013 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

Core Reduction: (\$35,698,082) (FED \$1,555,525 EE & \$22,551,961 PSD and OTHER \$1,292,625 EE & \$10,297,971 PSD) core reduction – eliminates section

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

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	FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.605														
MO HLTHNET SUPP POOL - 90582C														
CORE														
EXPENSE & EQUIPMENT	126,195	0.00	2,848,150	0.00	2,848,150	0.00	2,848,150	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	34,488	0.00	1,555,525	0.00	1,555,525	0.00	1,555,525	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	91,707	0.00	1,292,625	0.00	1,292,625	0.00	1,292,625	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	31,533,382	0.00	32,849,932	0.00	32,849,932	0.00	32,849,932	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	20,225,460	0.00	22,551,961	0.00	22,551,961	0.00	22,551,961	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	11,307,922	0.00	10,297,971	0.00	10,297,971	0.00	10,297,971	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$31,659,577	0.00	\$35,698,082	0.00	\$35,698,082	0.00	\$35,698,082	0.00	\$0	0.00	\$0	0.00	\$0	0.00
TOTAL - MO HLTHNET SUPP POOL	\$31,659,577	0.00	\$35,698,082	0.00	\$35,698,082	0.00	\$35,698,082	0.00	\$0	0.00	\$0	0.00	\$0	0.00